

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American College of Radiology Association PAC

ADDRESS (number and street) ▼

1891 Preston White Drive

☐ Check if different than previously reported. (ACC)

Reston

VA

20191

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00343459

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☒ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
10 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
10 31 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Richard Taxin MD

Signature of Treasurer

Richard Taxin MD

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
11 20 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Radiology Association PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
10 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2015</span>		<span style="border: 1px solid black; padding: 2px;">261891.77</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">631329.55</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">168067.95</span>	<span style="border: 1px solid black; padding: 2px;">1092442.82</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">799397.50</span>	<span style="border: 1px solid black; padding: 2px;">1354334.59</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">2007.78</span>	<span style="border: 1px solid black; padding: 2px;">556944.87</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">797389.72</span>	<span style="border: 1px solid black; padding: 2px;">797389.72</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American College of Radiology Association PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 10 01 2015

To:

 M M / D D / Y Y Y Y Y  
 10 31 2015
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

150145.37

970728.52

(ii) Unitemized .....

17922.58

120964.30

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

168067.95

1091692.82

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

168067.95

1091692.82

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

750.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

168067.95

1092442.82

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

168067.95

1092442.82

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	507.78	11507.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	507.78	11507.57
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1500.00	544500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	937.30
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	937.30
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2007.78	556944.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2007.78	556944.87

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	168067.95	1091692.82
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	937.30
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	168067.95	1090755.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	507.78	11507.57
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	507.78	11507.57

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Essmaeel H Abdel-Dayem MD**

Mailing Address 25 Thatcher St Apt 5

City

Brookline

State

MA

Zip Code

02446-3532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

**Transaction ID : C3183754**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Stephen Israel Abedon**

Mailing Address 64 Elmgrove Ave

City

Providence

State

RI

Zip Code

02906-4135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

**Transaction ID : C3193708**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Darshan J Acharya MD**

Mailing Address 301 NW Meridian Ridge Ct

City

Portland

State

OR

Zip Code

97210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRG/The Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2015

**Transaction ID : C3112695**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

225.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Darshan J Acharya MD**

Mailing Address 301 NW Meridian Ridge Ct

City State Zip Code  
 Portland OR 97210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TRG/The Radiology Group

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2015

**Transaction ID : C3114298**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Arthur S Albert**

Mailing Address 124 W 60th St Apt 45

City State Zip Code  
 New York NY 10023-7402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hackensack Radiology Group

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2015

**Transaction ID : C3180492**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**c. Arthur S Albert**

Mailing Address 124 W 60th St Apt 45

City State Zip Code  
 New York NY 10023-7402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hackensack Radiology Group

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2015

**Transaction ID : C3180519**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

96.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Arthur S Albert**

Mailing Address 124 W 60th St Apt 45

City

New York

State

NY

Zip Code

10023-7402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2015			

Transaction ID : C3183689

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. David Alan Alexander MD**

Mailing Address 2141 272nd Way SE

City

Sammamish

State

WA

Zip Code

98075-7937

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			13			2015			

Transaction ID : C3193716

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Anton M Allen**

Mailing Address 12136 E Ashton Ct

City

Knoxville

State

TN

Zip Code

37934-1526

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Univ of Tennessee Medical Cente

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2015			

Transaction ID : C3120136

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

448.07

TOTAL This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Bibb Allen JR**

Mailing Address 3245 E Briarcliff Rd

City

Birmingham

State

AL

Zip Code

35223-1304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Montclair Baptist Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

**Transaction ID : C3109078**

Amount of Each Receipt this Period

625.00

Full Name (Last, First, Middle Initial)

**B. Gary Edwin Allen**

Mailing Address 205 Sologne Ct

City

Little Rock

State

AR

Zip Code

72223-8915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

**Transaction ID : C3119996**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Michael J Alline**Mailing Address Jefferson Radiology Associates  
1111 Medical Center Blvd Ste 108

City

Marrero

State

LA

Zip Code

70072-3192

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jefferson Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2015

**Transaction ID : C3119443**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

900.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Josie Ruth Alpers**

Mailing Address 6609 E Split Rock Cir

City State Zip Code  
 Sioux Falls SD 57110-1306

FEC ID number of contributing federal political committee.

C

Name of Employer

Avera McKennan

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 23 2015

Transaction ID : C3178326

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Mark David Alson**

Mailing Address 6641 N Forkner Ave

City State Zip Code  
 Fresno CA 93711-1326

FEC ID number of contributing federal political committee.

C

Name of Employer

Sierra Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 27 2015

Transaction ID : C3179664

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Rafael A Altieri**

Mailing Address 15 Savoy St Apt D308

City State Zip Code  
 Boston MA 02118-2588

FEC ID number of contributing federal political committee.

C

Name of Employer

South Shore Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 02 2015

Transaction ID : C3183755

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Gregg D Alzate**Mailing Address San Diego Diag Radiology Med Grp  
PO Box 23540

City	State	Zip Code
San Diego	CA	92193-3540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
San Diego Imaging Medical GroupOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193295**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Seth Anderson DO**

Mailing Address 2267 11th St

City	State	Zip Code
Coralville	IA	52241-1368

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of IowaOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2015

**Transaction ID : C3121691**

Amount of Each Receipt this Period

22.00

Full Name (Last, First, Middle Initial)

**C. Thomas A Applewhite**

Mailing Address 13074 Starbuck Rd

City	State	Zip Code
Saint Louis	MO	63141-8544

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
West County Radiological GroupOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : C3183712**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

697.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Joseph Jackson Armistead**

Mailing Address 186 Mount Calvary Rd

City

Marietta

State

GA

Zip Code

30064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology Northwest

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : C3184734**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. John Gregory Baden**

Mailing Address 9 Germay Ct

City

Little Rock

State

AR

Zip Code

72223-5520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 12 / 2015

**Transaction ID : C3119997**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Diana Beth Baker**

Mailing Address 335 Ambar Way

City

Menlo Park

State

CA

Zip Code

94025-5801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2015

**Transaction ID : C3193679**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

825.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Edward L Baker**
 Mailing Address California Pacific Med Ctr  
 PO Box 7999

 City State Zip Code  
 San Francisco CA 94120-7999

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 10 / 19 / 2015

Transaction ID : C3193678

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Marchello Joseph Barbarisi**

Mailing Address 415 City Ave Apt 13

 City State Zip Code  
 Merion Station PA 19066-1841

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 10 / 07 / 2015

Transaction ID : C3183828

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**c. Joseph Michael Barry MD**

Mailing Address 161 Nathan Ln

 City State Zip Code  
 Carlisle MA 01741-1340

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Commonwealth Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 10 / 20 / 2015

Transaction ID : C3121692

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Howard Marshall Bear**

Mailing Address 4931 Pearlman Way

City

San Diego

State

CA

Zip Code

92130-2789

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

1110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193296**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Howard Marshall Bear**

Mailing Address 4931 Pearlman Way

City

San Diego

State

CA

Zip Code

92130-2789

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

1110.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2015

**Transaction ID : C3111329**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Daniel J Becker**

Mailing Address 1015 Murray Hill Ln

City

Memphis

State

TN

Zip Code

38120-2643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

**Transaction ID : C3193637**

Amount of Each Receipt this Period

294.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

944.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas C Bell**

Mailing Address Radiology of Huntsville, PC  
 2006 Franklin St SE Ste 200

City Huntsville State AL Zip Code 35801-4537

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Radiology of Huntsville

Occupation  
 Diagnostic Radiologist

Receipt For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 19 / 2015

**Transaction ID : C3121560**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Nancy Benedetti MD**

Mailing Address 6401 S Boston St Unit B205

City Greenwood Village State CO Zip Code 80111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Radiology Imaging Associates

Occupation  
 Diagnostic Radiologist

Receipt For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 17 / 2015

**Transaction ID : C3119413**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. G Gregg Berg**

Mailing Address 2253 Indian Hill Rd

City Cedar Rapids State IA Zip Code 52403-1521

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Radiology Consultants of Iowa

Occupation  
 Diagnostic Radiologist

Receipt For: 2015  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 08 / 2015

**Transaction ID : C3194548**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Kenneth G Berkenstock**Mailing Address Lancaster Radiology Associates  
PO Box 3555

City	State	Zip Code
Lancaster	PA	17604-3555

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Radiation Oncologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2015

**Transaction ID : C3183845**

Amount of Each Receipt this Period

840.00

Full Name (Last, First, Middle Initial)

**B. Timothy Andrew Bernauer**

Mailing Address 13 Pintail Pl

City	State	Zip Code
Appleton	WI	54913-8068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Appleton

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2015

**Transaction ID : C3119444**

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

**c. Michael Brandon Berry MD**

Mailing Address 1505 Trafalgar Rd

City	State	Zip Code
Winterville	NC	28590-9823

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : C3193651**

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

420.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. James S Bezreh**Mailing Address South Shore Hospital  
55 Fogg Rd

City	State	Zip Code
South Weymouth	MA	02190-2455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2015

**Transaction ID : C3183756**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Bruce J Biederman**

Mailing Address 2171 Del Mar Heights Rd

City	State	Zip Code
Del Mar	CA	92014-3019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Touro Infirmary

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193325**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**c. Linda K Blom**

Mailing Address 3360 Bridle Run Trl NW

City	State	Zip Code
Marietta	GA	30064-1788

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology Northwest

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3184735**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

950.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Sarah Bochar**

Mailing Address 85 N Devereux Ct NW

City	State	Zip Code
Atlanta	GA	30327-4225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

Transaction ID : C3184736

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Adam Russell Bogomol**Mailing Address 200 W 72nd St  
Apt 11K

City	State	Zip Code
New York	NY	10023-3267

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

Transaction ID : C3180491

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Adam Russell Bogomol**Mailing Address 200 W 72nd St  
Apt 11K

City	State	Zip Code
New York	NY	10023-3267

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

Transaction ID : C3180518

Amount of Each Receipt this Period

23.07

SUBTOTAL of Receipts This Page (optional)..... ►

546.14

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Adam Russell Bogomol**Mailing Address 200 W 72nd St  
Apt 11KCity State Zip Code  
New York NY 10023-3267FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

Transaction ID : C3183688

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Scott Michael Boles**Mailing Address San Diego Diagnostic Radiology  
PO Box 23540City State Zip Code  
San Diego CA 92193-3540FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

Transaction ID : C3193297

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. John Christopher Bools**Mailing Address Catawba Radiological Assoc  
18 13th Ave NECity State Zip Code  
Hickory NC 28601-3748FEC ID number of contributing  
federal political committee.

C

Name of Employer

Catawba Radiological Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

Transaction ID : C3183813

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ▶

773.07

TOTAL This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Bruce L Bower**

Mailing Address 969 Market St.  
Unit 1601

City State Zip Code  
San Diego CA 92101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
San Diego Imaging Medical Group

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

**Transaction ID : C3193298**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. James W Boyd**

Mailing Address 1831 Greywell Rd

City State Zip Code  
Knoxville TN 37922-9455

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Association of University Radiologists

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 12 / 2015

**Transaction ID : C3122473**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**c. Yong C Bradley**

Mailing Address 11507 Cottage Creek

City State Zip Code  
Knoxville TN 37934

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Association of University Radiologists

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 12 / 2015

**Transaction ID : C3122503**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

850.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Janice K Brenneman**Mailing Address Radiology Imaging Assoc  
10700 E Geddes Ave Ste 200

City Englewood State CO Zip Code 80112-3861

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Imaging Associates, P.C.Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3194610**

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

**B. Janice K Brenneman**Mailing Address Radiology Imaging Assoc  
10700 E Geddes Ave Ste 200

City Englewood State CO Zip Code 80112-3861

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Imaging Associates, P.C.Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3194571**

Amount of Each Receipt this Period

1693.33

Full Name (Last, First, Middle Initial)

**c. Kelly C Broderick**

Mailing Address 185 Crest Rd

City Woodside State CA Zip Code 94062-2308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California Advanced Imaging, M.A.Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193680**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1826.02

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas Andrew Brooks**

Mailing Address 1930 Pickering Trl

City

Lancaster

State

PA

Zip Code

17601-4972

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

**Transaction ID : C3183846**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. Matthew E Brown MD**

Mailing Address 6941 Lehigh Ct

City

Allentown

State

PA

Zip Code

18106-9540

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Imaging of Lehigh Valley

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

**Transaction ID : C3109978**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Stephen John Brown**

Mailing Address 509 McCowan Creek Rd

City

Newport

State

TN

Zip Code

37821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Association of University Radiologists

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

**Transaction ID : C3122497**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

410.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Stephen Douglas Brown**

Mailing Address 3635 N 250 W

City

State

Zip Code

Provo

UT

84604-4428

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Utah Valley Radiology

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

**Transaction ID : C3183626**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. John S Buchignani JR**

Mailing Address 6080 River Oaks Rd

City

State

Zip Code

Memphis

TN

38120-2547

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Mid South Imaging

Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

**Transaction ID : C3193629**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. Derek Alan Burdeny**

Mailing Address 1509 S 182nd Cir

City

State

Zip Code

Omaha

NE

68130-2720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Midwest Medical Imaging Ctr

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193681**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

569.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Holly J Burge**

Mailing Address 14248 Wyndfield Circle

City	State	Zip Code
Raleigh	NC	27615-1317

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

**Transaction ID : C3183782**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Michael S Burke MD**

Mailing Address 2217 Silver Peak Pl

City	State	Zip Code
Encinitas	CA	92024-3145

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Interventional Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193326**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. Vincent D Burke**Mailing Address Sequoia Hospital  
170 Alameda de las Pulgas

City	State	Zip Code
Redwood City	CA	94062-2799

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

**Transaction ID : C3193682**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

795.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Larry J Burr**

Mailing Address 2601 Deer Lane Rd

City  
MarionState  
IAZip Code  
52302-9304FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2015

Transaction ID : C3194549

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Justin John Campbell MD**

Mailing Address 55 Fogg Rd

City

South Weymouth

State

MA

Zip Code

02190-2432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Massachusetts General Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2015

Transaction ID : C3183757

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**c. Paul Dennis Campbell MD**

Mailing Address 1843 Greywell Rd

City

Knoxville

State

TN

Zip Code

37922-9455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Association of University Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

Transaction ID : C3122484

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

475.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Vida Ashraf Campbell**

Mailing Address 2539 Vallejo St

City

San Francisco

State

CA

Zip Code

94123-4640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193683**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Aaron Darius Cann**

Mailing Address 1539 Nantahalla Ct NE

City

Atlanta

State

GA

Zip Code

30329-3548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3184737**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Patrick H Carey**Mailing Address San Diego Imaging  
8745 Aero Dr Ste 200

City

San Diego

State

CA

Zip Code

92123-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193299**

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

925.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Mark Aaron Chambers MD**

Mailing Address 1005 Des Peres Woods Ct

City	State	Zip Code
Des Peres	MO	63131-2055

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
West County Radiological GroupOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

Transaction ID : C3183713

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Shelley K Charnoff**

Mailing Address 192 Hinckley Rd

City	State	Zip Code
Milton	MA	02186-2853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
South Shore HospitalOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

Transaction ID : C3183758

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Norman C Chen**

Mailing Address 8745 Aero Dr Ste 200

City	State	Zip Code
San Diego	CA	92123-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
San Diego Imaging Medical GroupOccupation  
Physician

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

Transaction ID : C3193300

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Sendhil K Cheran MD**

Mailing Address 108 Whisperwood Dr

City	State	Zip Code
Cary	NC	27518-9120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

**Transaction ID : C3183783**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. Raja Sekhar Cheruvu**

Mailing Address 165 Via Foresta Ln

City	State	Zip Code
Williamsville	NY	14221-1984

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Windsong Radiology Group

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

812.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2015

**Transaction ID : C3110325**

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

**c. Karl S Chiang**Mailing Address Eastern Radiologists Inc  
9 Doctors Park

City	State	Zip Code
Greenville	NC	27834-2801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists Inc

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

**Transaction ID : C3193652**

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

248.50

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Regina Wong Chu**

Mailing Address 15 Ogle Rd

City	State	Zip Code
Old Tappan	NJ	07675-7028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

Transaction ID : C3180484

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**B. Regina Wong Chu**

Mailing Address 15 Ogle Rd

City	State	Zip Code
Old Tappan	NJ	07675-7028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

Transaction ID : C3180511

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**C. Regina Wong Chu**

Mailing Address 15 Ogle Rd

City	State	Zip Code
Old Tappan	NJ	07675-7028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

Transaction ID : C3183681

Amount of Each Receipt this Period

9.61

SUBTOTAL of Receipts This Page (optional)..... ►

28.83

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Nathaniel Ai-Hsi Chuang**Mailing Address San Diego Imaging Med Group  
8745 Aero Dr Ste 200

City	State	Zip Code
San Diego	CA	92123-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
San Diego Imaging Medical GroupOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193301**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Timothy J Clark**

Mailing Address 324 Dupont Cir

City	State	Zip Code
Greenville	NC	27858-6520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eastern RadiologistsOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : C3193653**

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**C. George Glenn Coates**Mailing Address Wake Radiology & Consultants  
PO Box 19368

City	State	Zip Code
Raleigh	NC	27619-9368

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wake Radiology & ConsultantsOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183784**

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

846.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Karen A Coates**

Mailing Address 106 Baybrook Ct

City	State	Zip Code
Cary	NC	27518-9422

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wake Radiology Consultants, P.A.Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183785**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Richard J Coleman**

Mailing Address 2942 Hampton Cove Way SE

City	State	Zip Code
Owens Cross Roads	AL	35763-9330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology of Huntsville, P.C.Occupation  
Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

**Transaction ID : C3178324**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. PEDRO COLLAZO-ORNES**

Mailing Address P.O. BOX 9024255

City	State	Zip Code
SAN JUAN	PR	00902-4255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SP RADIOLOGY, PSCOccupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2015

**Transaction ID : C3121583**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1220.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Glenn Clyde Cook**Mailing Address Scottsdale Med Imaging Ltd  
3501 N Scottsdale Rd Ste 130

City	State	Zip Code
Scottsdale	AZ	85251-5649

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Scottsdale Medical ImagingOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

**Transaction ID : C3194533**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Joseph B Cornett**

Mailing Address 113 Arrowstone Ct

City	State	Zip Code
Morrisville	NC	27560-6977

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wake Radiology Consultants, P.A.Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

**Transaction ID : C3183786**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**c. David Laughlin Coy MD, PhD**

Mailing Address 5443 Kirkwood Pl N

City	State	Zip Code
Seattle	WA	98103-6241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Virginia Mason Medical CenterOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2015

**Transaction ID : C3178922**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

420.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Jana Crain**

Mailing Address 863 Corriente Point Dr

City	State	Zip Code
Redwood City	CA	94065-1284

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CA Advanced ImagingOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

**Transaction ID : C3193684**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Daniel Andrew Craven**

Mailing Address 1334 Marsh Creek Ln

City	State	Zip Code
Collierville	TN	38017-3940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mid South ImagingOccupation  
Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

**Transaction ID : C3193638**

Amount of Each Receipt this Period

291.69

Full Name (Last, First, Middle Initial)

**C. Timothy Andrew Crummy**

Mailing Address 2509 Middleton Beach Rd

City	State	Zip Code
Madison	WI	53562-2912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Madison RadiologistsOccupation  
Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

704.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

**Transaction ID : C3110481**

Amount of Each Receipt this Period

30.42

**SUBTOTAL** of Receipts This Page (optional)..... ►

397.11

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Shaoe Cutts MD**

Mailing Address 15449 Pinehurst Pl

City	State	Zip Code
San Diego	CA	92131-4331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

Transaction ID : C3193302

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Henry Jivan Dalsania MD**

Mailing Address 360 Forest Hill Irene Rd S

City	State	Zip Code
Cordova	TN	38018-4830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Transaction ID : C3193625

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. Keith C Dangleis**

Mailing Address 2515 S Cook St

City	State	Zip Code
Denver	CO	80210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Associates, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

Transaction ID : C3194593

Amount of Each Receipt this Period

57.69

SUBTOTAL of Receipts This Page (optional)..... ►

951.69

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Keith C Dangleis**

Mailing Address 2515 S Cook St

City State Zip Code  
 Denver CO 80210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Radiology Imaging Associates, P.C.

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 26 2015

**Transaction ID : C3194572**

Amount of Each Receipt this Period

1693.33

Full Name (Last, First, Middle Initial)

**B. Jaydip Datta**

Mailing Address 235 Saint Nicholas Circle

City State Zip Code  
 Atlanta GA 30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Quantum Radiology

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 26 2015

**Transaction ID : C3184741**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Justine C Dautenhahn**

Mailing Address 149 Lake Aluma Dr

City State Zip Code  
 Oklahoma City OK 73121-3401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Norman Radiology Services, Inc

Occupation  
 Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 27 2015

**Transaction ID : C3179606**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3193.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. W James DeMartini**

Mailing Address 126 Terrace Ave

City

Kentfield

State

CA

Zip Code

94904-1531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

**Transaction ID : C3193685**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. John S DeMeritt**

Mailing Address 18 Baldwin Rd

City

Saddle River

State

NJ

Zip Code

07458-3203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

**Transaction ID : C3180493**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**c. John S DeMeritt**

Mailing Address 18 Baldwin Rd

City

Saddle River

State

NJ

Zip Code

07458-3203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

**Transaction ID : C3180520**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. John S DeMeritt**

Mailing Address 18 Baldwin Rd

City

Saddle River

State

NJ

Zip Code

07458-3203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	1	5

**Transaction ID : C3183690**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Elvin Lephiew Dennington**

Mailing Address 722 N Harrison St

City

Little Rock

State

AR

Zip Code

72205-3525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Methodist Healthcare

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	1	5

**Transaction ID : C3119998**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. Mark A Dennis**

Mailing Address 4070 E Linden Ln

City

Greenwood Village

State

CO

Zip Code

80121-3928

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

5253.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	5

**Transaction ID : C3194574**

Amount of Each Receipt this Period

5079.98

**SUBTOTAL** of Receipts This Page (optional)..... ►

5353.05

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Mark A Dennis**

Mailing Address 4070 E Linden Ln

City	State	Zip Code
Greenwood Village	CO	80121-3928

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5253.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

Transaction ID : C3194594

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

**B. Susan R Denny**

Mailing Address 402 Median Way

City	State	Zip Code
Mill Valley	CA	94941-3561

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

Transaction ID : C3193686

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. John Joseph Dente**

Mailing Address 11484 Caminito Garcia

City	State	Zip Code
San Diego	CA	92131-2133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

Transaction ID : C3193303

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

848.07

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 39 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Scott David Didier MD**

Mailing Address 835 Tall Spruce Cv

City	State	Zip Code
Collierville	TN	38017-8554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

**Transaction ID : C3193639**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**B. Malcolm S Dobrow**

Mailing Address 5693 E Southmoor Cir

City	State	Zip Code
Englewood	CO	80111-1042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RIA

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

**Transaction ID : C3194595**

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

**C. Malcolm S Dobrow**

Mailing Address 5693 E Southmoor Cir

City	State	Zip Code
Englewood	CO	80111-1042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RIA

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

**Transaction ID : C3194576**

Amount of Each Receipt this Period

1693.33

**SUBTOTAL** of Receipts This Page (optional)..... ►

2045.02

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Christopher Edward Dory**

Mailing Address Childrens Hospitals  
3020 Childrens Way

City State Zip Code  
San Diego CA 92123-4282

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 06 / 2015

**Transaction ID : C3193304**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Melissa B Duncan**

Mailing Address 1806 Bloomsbury Rd

City State Zip Code  
Greenville NC 27858-9612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2015

**Transaction ID : C3193654**

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**c. David H Dungan**

Mailing Address 940 Front Range Rd

City State Zip Code  
Littleton CO 80120-4007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaginig Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : C3194596**

Amount of Each Receipt this Period

57.69

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

783.69



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. David H Dungan**

Mailing Address 940 Front Range Rd

City	State	Zip Code
Littleton	CO	80120-4007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Imaginig AssociatesOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

Transaction ID : C3194577

Amount of Each Receipt this Period

1693.33

Full Name (Last, First, Middle Initial)

**B. Anne P Dunne**

Mailing Address 102 Andrews Ct

City	State	Zip Code
Lewisburg	PA	17837-6510

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Geisinger Medical CenterOccupation  
Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

Transaction ID : C3113118

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**c. Jerry R Dwek**

Mailing Address 427 Barbara Ave

City	State	Zip Code
Solana Beach	CA	92075-1201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
San Diego Imaging Medical GroupOccupation  
Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

Transaction ID : C3193305

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

3293.33

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 42 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Matthew D Dyson MD**

Mailing Address 406 6th St NW

City	State	Zip Code
Hickory	NC	28601-3502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catawba Radiological AssociatesOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183814**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Kevin Scott Early MD**

Mailing Address 85 N Devereaux Ct NW

City	State	Zip Code
Atlanta	GA	30327-4225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Quantum RadiologyOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3184742**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**c. Alan David Eisenberg**

Mailing Address 6305 Humphreys Blvd Ste 205

City	State	Zip Code
Memphis	TN	38120-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mid South ImagingOccupation  
Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

**Transaction ID : C3193640**

Amount of Each Receipt this Period

294.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1444.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Ahmed Bassem Elaini MD**

Mailing Address PO Box 54

City	State	Zip Code
Andover	MA	01810-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Massachusetts General HospitalOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2015

Transaction ID : C3183759

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Paul H Ellenbogen**

Mailing Address 4240 Prescott Ave Apt 7E

City	State	Zip Code
Dallas	TX	75219-2392

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southwest Imaging & Interven specialisOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1583.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2015

Transaction ID : C3118997

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

**C. John Andy Ellzey**

Mailing Address 219 Lagrange Creek Dr

City	State	Zip Code
Eads	TN	38028-8015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baptist Memorial HospitalOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : C3193630

Amount of Each Receipt this Period

294.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

477.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Margaret Y Emy**

Mailing Address 245 Oxford Dr

City

Tenaflly

State

NJ

Zip Code

07670-3117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : C3180480**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**B. Margaret Y Emy**

Mailing Address 245 Oxford Dr

City

Tenaflly

State

NJ

Zip Code

07670-3117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

**Transaction ID : C3180507**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**C. Margaret Y Emy**

Mailing Address 245 Oxford Dr

City

Tenaflly

State

NJ

Zip Code

07670-3117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

**Transaction ID : C3183677**

Amount of Each Receipt this Period

9.61

**SUBTOTAL** of Receipts This Page (optional)..... ►

28.83

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. William Scott Enochs**

Mailing Address 230 Poplar Ave

City State Zip Code  
Wayne PA 19087-3504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thomas Jefferson University Ho

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 07 / 2015

**Transaction ID : C3183833**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Timothy Enright MD**

Mailing Address 2044 E Higgins HI

City State Zip Code  
DE Pere WI 54115-1683

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Green Bay Radiology

Occupation  
Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2015

**Transaction ID : C3180615**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. Kathy Epley**

Mailing Address 1948 First Ave NE

City State Zip Code  
Cedar Rapids IA 52402-5321

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Consultants of Iowa, PLC

Occupation  
Practice Administrator

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 08 / 2015

**Transaction ID : C3194550**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

800.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Steven L Epner**

Mailing Address 8148 Gilman Ct

City	State	Zip Code
La Jolla	CA	92037-2933

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Paradise Valley RadiologyOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

Transaction ID : C3193327

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Virginia Eschbach**

Mailing Address 2410 141St PI SE

City	State	Zip Code
Mill Creek	WA	98012-1336

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radia, Inc.Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2015

Transaction ID : C3193717

Amount of Each Receipt this Period

180.00

Full Name (Last, First, Middle Initial)

**C. Darryl K Evora**

Mailing Address 11678 Sardis PI

City	State	Zip Code
San Diego	CA	92131-3858

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
San Diego Imaging Medical GroupOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

Transaction ID : C3193306

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1380.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Nina L Fabiszewski**

Mailing Address 4300 Calverton Ln

City

Virginia Beach

State

VA

Zip Code

23455-5514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Center Radiologists, I

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

Transaction ID : C3183863

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Stephen L Farris MD**

Mailing Address 3996 2nd Street Dr NW

City

Hickory

State

NC

Zip Code

28601-8092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Catawba Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

Transaction ID : C3183815

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Amanda Jane Ferrell**

Mailing Address 1606 Blair St

City

Little Rock

State

AR

Zip Code

72207-5302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

Transaction ID : C3119999

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

2400.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Andrew S Ferrell**

Mailing Address 1294 Kensington Drive

City	State	Zip Code
Knoxville	TN	37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Association of University Radiologists

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

Transaction ID : C3120135

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. George Joseph Ferrone**

Mailing Address 440 E 62nd St Apt 18F

City	State	Zip Code
New York	NY	10065-8345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

Transaction ID : C3180485

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. George Joseph Ferrone**

Mailing Address 440 E 62nd St Apt 18F

City	State	Zip Code
New York	NY	10065-8345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

Transaction ID : C3180512

Amount of Each Receipt this Period

23.07

SUBTOTAL of Receipts This Page (optional)..... ►

171.14

TOTAL This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. George Joseph Ferrone**

Mailing Address 440 E 62nd St Apt 18F

City	State	Zip Code
New York	NY	10065-8345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

**Transaction ID : C3183682**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Laura Katherine Findeiss**

Mailing Address 445 W Blount Ave Apt 518

City	State	Zip Code
Knoxville	TN	37920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Association of University Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

**Transaction ID : C3122478**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Tobin Andrew Finizio II**

Mailing Address 3506 Lakeview Trl

City	State	Zip Code
Kinston	NC	28504-8183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : C3193655**

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

274.07

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 50 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Andrew Joel Fisher**Mailing Address Radiology Imaging Assoc  
10700 E Geddes Ave Ste 200

City Englewood State CO Zip Code 80112-3861

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3194597**

Amount of Each Receipt this Period

28.83

Full Name (Last, First, Middle Initial)

**B. Andrew Joel Fisher**Mailing Address Radiology Imaging Assoc  
10700 E Geddes Ave Ste 200

City Englewood State CO Zip Code 80112-3861

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3194578**

Amount of Each Receipt this Period

846.22

Full Name (Last, First, Middle Initial)

**C. Matthew J Fleishman**

Mailing Address 831 S Williams St

City Denver State CO Zip Code 80209-4540

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Associates, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3194598**

Amount of Each Receipt this Period

57.69

**SUBTOTAL** of Receipts This Page (optional)..... ►

932.74

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Matthew J Fleishman**

Mailing Address 831 S Williams St

City

Denver

State

CO

Zip Code

80209-4540

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Associates, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

**Transaction ID : C3194579**

Amount of Each Receipt this Period

1693.33

Full Name (Last, First, Middle Initial)

**B. Kathleen M Flores-Dahms**

Mailing Address 2529 Quidde Ave

City

San Diego

State

CA

Zip Code

92122-4024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Univeristy of California SF

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193328**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**c. Jonathan Flug MD, MBA**

Mailing Address 1490 Delgany St Apt 1027

City

Denver

State

CO

Zip Code

80202-6616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of Colorado

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary  
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2015

**Transaction ID : C3178171**

Amount of Each Receipt this Period

85.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2378.33

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Jonathan Flug MD, MBA

Mailing Address 1490 Delgany St Apt 1027

City State Zip Code  
Denver CO 80202-6616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Colorado

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2015

Transaction ID : C3179115

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Robert P Flynn

Mailing Address 8281 Paseo Del Ocaso

City State Zip Code  
La Jolla CA 92037-3142

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
San Diego Imaging Medical Group

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : C3193307

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

C. Kevin F Forte

Mailing Address Radiology Consultants of Little Ro  
9601 Baptist Health Dr Ste 1100

City State Zip Code  
Little Rock AR 72205-6333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Consultants of Little Rock

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 12 / 2015

Transaction ID : C3120000

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

860.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Daniel Robert Fox**

Mailing Address 1505 Halesworth Ln

City

Knoxville

State

TN

Zip Code

37922-8562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PO Box 1296

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 12 / 2015

**Transaction ID : C3120137**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Nicholas Frankel**

Mailing Address PO Box 9470

City

Hickory

State

NC

Zip Code

28603-9470

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Catawba Radiological Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 05 / 2015

**Transaction ID : C3183816**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Eric Brian Friedberg**

Mailing Address 2000 Tavistock Ct

City

Johns Creek

State

GA

Zip Code

30022-8079

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Emory University

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : C3108751**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

375.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Jeffrey A Friedland**

Mailing Address 21 Garfield St

City	State	Zip Code
Denver	CO	80206-5514

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Imaging Associates, P.C.Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

Transaction ID : C3194599

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

**B. Jeffrey A Friedland**

Mailing Address 21 Garfield St

City	State	Zip Code
Denver	CO	80206-5514

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Imaging Associates, P.C.Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

Transaction ID : C3194580

Amount of Each Receipt this Period

1693.33

Full Name (Last, First, Middle Initial)

**C. Russell Clinton Fritz**

Mailing Address 487 Green Glen Way

City	State	Zip Code
Mill Valley	CA	94941-4018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California Advanced Imaging Medical AsOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

Transaction ID : C3193687

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1826.02

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Yiu-Kai Fu**

Mailing Address 13028 7th Ave NW

City	State	Zip Code
Seattle	WA	98177-4243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2015

Transaction ID : C3193718

Amount of Each Receipt this Period

199.98

Full Name (Last, First, Middle Initial)

**B. Clinton J Fuller III**Mailing Address Radiology Consultants of Little Ro  
9601 Baptist Health Dr Ste 1100

City	State	Zip Code
Little Rock	AR	72205-6333

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

Transaction ID : C3120001

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. George W Gallimore JR**Mailing Address Mid-South Imaging & Therapeutics  
6305 Humphreys Blvd Ste 205

City	State	Zip Code
Memphis	TN	38120-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : C3193624

Amount of Each Receipt this Period

294.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

743.98

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Judson R Gash**

Mailing Address 7315 Dunsford Ln

City

Knoxville

State

TN

Zip Code

37919-8194

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Association of University Radiologists

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 12 / 2015

**Transaction ID : C3122468**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Morris L Gavant**

Mailing Address 3206 Fallstaff Rd

City

Baltimore

State

MD

Zip Code

21215-1721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Advanced Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 11 / 2015

**Transaction ID : C3114233**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Laurence F Gaynor**

Mailing Address Radiology Imaging Assoc  
10700 E Geddes Ave Ste 200

City

Englewood

State

CO

Zip Code

80112-3861

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates PC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.79

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : C3194581**

Amount of Each Receipt this Period

538.79

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

688.79



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 57 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Michael John George**

Mailing Address 1620 John St S

City  
SalemState  
ORZip Code  
97302-5110FEC ID number of contributing  
federal political committee.

C

Name of Employer

Salem Radiology Consultants

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Transaction ID : C3179665

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Bassem Adeeb Georgy**

Mailing Address 5458 Coach Ln

City

San Diego

State

CA

Zip Code

92130-3745

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UCSD Medical Center

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

Transaction ID : C3193329

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. Leonard H Gibson JR**

Mailing Address 1100 Woodland Dr NW

City

Wilson

State

NC

Zip Code

27893-2122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

Transaction ID : C3193656

Amount of Each Receipt this Period

126.00

SUBTOTAL of Receipts This Page (optional)..... ►

976.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Michael Spencer Gibson**

Mailing Address 4685 Coret mar de Corazon

City	State	Zip Code
San Diego	CA	92130-2692

FEC ID number of contributing federal political committee.

C

Name of Employer  
Eagle Eye RadiologyOccupation  
Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

Transaction ID : C3112912

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Thomas R Gleason**Mailing Address Gleason Diagnostic Imaging PC  
1015 Union St

City	State	Zip Code
Boone	IA	50036-4898

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Diagnostic Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2015

Transaction ID : C3183404

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

**C. Brian Wayne Goelitz MD**

Mailing Address 12805 Ralston Cir

City	State	Zip Code
San Diego	CA	92130-2447

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self-employedOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

Transaction ID : C3193330

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1215.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Justin Mathias Gooding**Mailing Address San Diego Imaging Medical Group  
3402 Piazza De Oro Way Ste 300

City Oceanside State CA Zip Code 92056-3787

FEC ID number of contributing  
federal political committee.

C

Name of Employer

North County Radiology Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193331**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Eric Todd Goodman**

Mailing Address 8933 Activity Rd

City San Diego State CA Zip Code 92126-4427

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sharp Rees-Stealy Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : C3122785**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Whitney J Goodwin MD**

Mailing Address 22 Tallyho Ln

City Little Rock State AR Zip Code 72227-2416

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

**Transaction ID : C3120002**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

950.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Brian Mark Gordon**

Mailing Address 470 Winfield Glen Ct NE

City	State	Zip Code
Atlanta	GA	30342-1430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

Transaction ID : C3184747

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Robert L Gore**

Mailing Address 79 Richmond St

City	State	Zip Code
Dorchester Center	MA	02124-5729

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2015

Transaction ID : C3183760

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Jeffrey Carl Gore**

Mailing Address 2320 Cromwell Cir

City	State	Zip Code
Davenport	IA	52807-2833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Group, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

Transaction ID : C3183780

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Lauren Thomson Granata MD**

Mailing Address 1317 Five Point Rd

City State Zip Code  
 Virginia Beach VA 23454-1930

FEC ID number of contributing federal political committee.

C

Name of Employer

Medical Center Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2015

Transaction ID : C3183864

Amount of Each Receipt this Period

252.00

Full Name (Last, First, Middle Initial)

**B. Mark Robert Green MD**

Mailing Address 420 Florida Avenue SE

City State Zip Code  
 Atlanta GA 30316-1542

FEC ID number of contributing federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2015

Transaction ID : C3184748

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Scott J Greenley MD**

Mailing Address 18040 Shavers Ln

City State Zip Code  
 Wayzata MN 55391-2738

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2015

Transaction ID : C3178638

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1752.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Dennis J Griffin**

Mailing Address 4501 South Franklin Street

City State Zip Code  
Englewood CO 80110-5936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Associates PC

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : C3194600**

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

**B. Dennis J Griffin**

Mailing Address 4501 South Franklin Street

City State Zip Code  
Englewood CO 80110-5936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Associates PC

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : C3194582**

Amount of Each Receipt this Period

1693.32

Full Name (Last, First, Middle Initial)

**C. Ericka Coats Griffin**

Mailing Address 2706 Isaac Dr

City State Zip Code  
Goldsboro NC 27530-8119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eastern Radiologists Inc.

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2015

**Transaction ID : C3193657**

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1877.01

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Shannon M Gulla MD**

Mailing Address 2043 Glenbuck Cv

City

Germantown

State

TN

Zip Code

38139-3432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 09 / 2015

**Transaction ID : C3193641**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**B. Carmelo Gullotto**

Mailing Address 3201 Twin Leaf Dr

City

Raleigh

State

NC

Zip Code

27613-6577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2015

**Transaction ID : C3183787**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**C. Jonathan Marc Gurney**

Mailing Address 1573 Copa De Oro Dr

City

La Jolla

State

CA

Zip Code

92037-7806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

**Transaction ID : C3193308**

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

954.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 64 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. David K Haas**

Mailing Address 2110 Homeview Ct

City	State	Zip Code
Las Vegas	NV	89117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

SDMI

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

Transaction ID : C3112913

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Labib Fouad Haddad**

Mailing Address 4 Ramsgate Dr

City	State	Zip Code
Olivette	MO	63132-4116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

West County Radiological Group

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

Transaction ID : C3183714

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Glenn M Hammer**

Mailing Address 2916 Old Orchard Rd NE

City	State	Zip Code
Cedar Rapids	IA	52402-6802

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Radiology Consultants of Iowa, PLC

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

Transaction ID : C3194551

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Gene Han MD**

Mailing Address 24 Briarcliff Rd

City	State	Zip Code
Tenafly	NJ	07670-2902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

Transaction ID : C3180494

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Gene Han MD**

Mailing Address 24 Briarcliff Rd

City	State	Zip Code
Tenafly	NJ	07670-2902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Transaction ID : C3180521

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Gene Han MD**

Mailing Address 24 Briarcliff Rd

City	State	Zip Code
Tenafly	NJ	07670-2902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2015

Transaction ID : C3183691

Amount of Each Receipt this Period

23.07

SUBTOTAL of Receipts This Page (optional)..... ►

69.21

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Steven D Harlan**

Mailing Address CRA

18 13th Ave NE, Box 308

City

Hickory

State

NC

Zip Code

28601-3748

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Catawba Radiological Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

Transaction ID : C3183817

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Ben Hugh Harmon**

Mailing Address Radia Medical Imaging

728 134th St SW Ste 120

City

Everett

State

WA

Zip Code

98204-5322

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

886.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2015

Transaction ID : C3193719

Amount of Each Receipt this Period

295.38

Full Name (Last, First, Middle Initial)

**C. Keith William Harper**

Mailing Address 602 46th Ave Dr NE

City

Hickory

State

NC

Zip Code

28601-7318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Catawba Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

Transaction ID : C3183818

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

595.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 67 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Scott B Harter**Mailing Address Radiology Consultants of Little Ro  
9601 Baptist Health Dr Ste 1100

City	State	Zip Code
Little Rock	AR	72205-6333

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

**Transaction ID : C3120003**

Amount of Each Receipt this Period

625.00

Full Name (Last, First, Middle Initial)

**B. Harlan Benjamin Harvey MD**

Mailing Address 39 Melrose St Apt 2

City	State	Zip Code
Boston	MA	02116-5304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

harlanharvey@gmail.com

Occupation

MGH Radiology

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

**Transaction ID : C3183104**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Anton N Hasso**Mailing Address Univ of CA-Irvine Med Ctr  
101 The City Dr S Bldg 56 Rm 300 R

City	State	Zip Code
Orange	CA	92868-3201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Univ of CA-Irvine Med Ctr

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

**Transaction ID : C3194612**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

3375.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Paul Andrew Haugan**

Mailing Address 3021 Cranesbill Dr

City

Raleigh

State

NC

Zip Code

27613-6579

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183788**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. C Matthew Hawkins MD**

Mailing Address 130 Woodlawn Ave

City

Decatur

State

GA

Zip Code

30030-2309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Emory University

Occupation

Pediatric Interventional Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : C3178856**

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

**C. Robert Alan Hawkins**

Mailing Address 7856 Scatchet Head Rd

City

Clinton

State

WA

Zip Code

98236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2015

**Transaction ID : C3193720**

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

630.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. David Alan Hays**

Mailing Address 18 Farnham Loop

City	State	Zip Code
Little Rock	AR	72223-9199

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Consultants of Little RockOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

Transaction ID : C3120004

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. D Cressler Heasley JR**

Mailing Address 4045 Stanford Ave

City	State	Zip Code
Dallas	TX	75225-7006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Texas Neuroradiology, P.A.Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : C3178634

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Steven Gregory Heiss**

Mailing Address 300 Elm St

City	State	Zip Code
Denver	CO	80220-5741

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Imaging AssociatesOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

Transaction ID : C3194601

Amount of Each Receipt this Period

57.69

SUBTOTAL of Receipts This Page (optional)..... ►

557.69

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Steven Gregory Heiss**

Mailing Address 300 Elm St

City

Denver

State

CO

Zip Code

80220-5741

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.01

Date of Receipt

10 / 26 / 2015

Transaction ID : C3194583

Amount of Each Receipt this Period

1693.32

Full Name (Last, First, Middle Initial)

**B. Laura S Hemann**

Mailing Address 6815 Spring Grove Ct NE

City

Cedar Rapids

State

IA

Zip Code

52411-7652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 08 / 2015

Transaction ID : C3194553

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. William T Henry SR**

Mailing Address Radiology Consultants of Little Ro  
9601 Baptist Health Dr Ste 1100

City

Little Rock

State

AR

Zip Code

72205-6333

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants - Little Rock, A

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

10 / 12 / 2015

Transaction ID : C3120006

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2193.32

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. William Taylor Henry MD**

Mailing Address 9601 Baptist Health Dr Ste 1100

City State Zip Code  
Little Rock AR 72205-6333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Consultants

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 12 / 2015

**Transaction ID : C3120005**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. John Osborne Herlong**

Mailing Address 1212 Sweetbriar Cir

City State Zip Code  
Kinston NC 28501-2641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eastern Radiologists Inc.

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2015

**Transaction ID : C3193658**

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**C. William T Herrington**

Mailing Address 1110 Laurel Pl

City State Zip Code  
Athens GA 30606-5789

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Athens Radiological Associates

Occupation  
Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 08 / 2015

**Transaction ID : C3113107**

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1876.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 72 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Lee Eric Hoagland MD**

Mailing Address 5922 Cyrpress Pointe Dr

City

Newburgh

State

IN

Zip Code

47630-9844

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Evansville Radiology, PC

Occupation

Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3110921**

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**B. Betsy A Holland**

Mailing Address 84 Platt Ave

City

Sausalito

State

CA

Zip Code

94965-1896

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

**Transaction ID : C3193688**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**c. Michael D Hollett**

Mailing Address 817 Lathrop Dr

City

Stanford

State

CA

Zip Code

94305-1054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

**Transaction ID : C3193689**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

235.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Adrian W Holtzman MD**

Mailing Address 945 18th Avenue Ct NW

City State Zip Code  
Hickory NC 28601-1268

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catawba Radiological Associates

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2015

Transaction ID : C3183819

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Raymond Joonki Hong MD**

Mailing Address 10779 Heather Ridge Dr

City State Zip Code  
San Diego CA 92130-6940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
North Shore Univ Hospital

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

Transaction ID : C3193332

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. Randy Joseph Horras**

Mailing Address 6545 Espalier Cir

City State Zip Code  
Memphis TN 38119-6648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baptist Mem Hosp-Univ of TN, Mem

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

627.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 09 / 2015

Transaction ID : C3193631

Amount of Each Receipt this Period

294.00

SUBTOTAL of Receipts This Page (optional)..... ►

1044.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

## **A. David Anthony Huelsman**

Mailing Address Good Samaritan Hosp  
375 Dixmyth Ave

City State Zip Code  
Cincinnati OH 45220-2489

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical X-Ray, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 29 / 2015

**Transaction ID : C3181795**

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

## **B. Eric A Hyson**

Mailing Address 1067 Wolf Hill Rd

City State Zip Code  
Cheshire CT 06410-1732

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Diagnostic Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 27 / 2015

**Transaction ID : C3180611**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **c. Elizabeth Ann Ignacio**

Mailing Address 71 Kamaiki Cir

City State Zip Code  
Kahului HI 96732-3153

FEC ID number of contributing  
federal political committee.

C

Name of Employer

George Washington Med Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2015

**Transaction ID : C3117147**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

715.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Roy George Jacob MD**

Mailing Address 5231 21st St

City

Lubbock

State

TX

Zip Code

79407-2159

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UMC hospital Lubbock

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 07 / 2015

Transaction ID : C3111735

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Michael Todd Jacobs**

Mailing Address 3818 11th Street PI NE

City

Hickory

State

NC

Zip Code

28601-8420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Catawba Radiological Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

10 / 05 / 2015

Transaction ID : C3183820

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Cindy Janesky**

Mailing Address Lancaster Radiology Associates  
 PO Box 3555

City

Lancaster

State

PA

Zip Code

17604-3555

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 08 / 2015

Transaction ID : C3183851

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Alex William Johnson**

Mailing Address 2309 Woodcliff Rd SE

City  
HuntsvilleState  
ALZip Code  
35801-1471FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology of Huntsville

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Transaction ID : C3180652

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Brian L Johnson**

Mailing Address 850 Chiltern Rd

City  
HillsboroughState  
CAZip Code  
94010-7028FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

Transaction ID : C3193690

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Dennis R Johnson**Mailing Address Eastern Radiologists Inc  
2101 W Arlington Blvd Ste 210City  
GreenvilleState  
NCZip Code  
27834-5758FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

Transaction ID : C3193659

Amount of Each Receipt this Period

126.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1201.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Eric Von Johnson MD**

Mailing Address 4451 3rd Street Ln NW

City State Zip Code  
Hickory NC 28601-9022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Catawba Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 05 / 2015

**Transaction ID : C3183821**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Lester Skolfield Johnson**

Mailing Address 1021 Downshire Chase

City State Zip Code  
Virginia Beach VA 23452-6154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Center Radiologists, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 05 / 2015

**Transaction ID : C3183865**

Amount of Each Receipt this Period

249.99

Full Name (Last, First, Middle Initial)

**C. Peter Anthony S Johnstone**

Mailing Address 810 Taray de Avila

City State Zip Code  
Tampa FL 33613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Moffitt Cancer Center

Occupation

Radiation Oncologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 22 / 2015

**Transaction ID : C3124049**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

499.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. William Falkes Jones**

Mailing Address 9477 E Shangri LA Rd

City

Scottsdale

State

AZ

Zip Code

85260-6143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

**Transaction ID : C3194534**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Lyndon Kirkman Jordan III**

Mailing Address 2301 White Oak Rd

City

Raleigh

State

NC

Zip Code

27608-1455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

**Transaction ID : C3183789**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**c. Brian Thomas Kaineg MD**

Mailing Address 3558 Ranier Dr NW

City

Atlanta

State

GA

Zip Code

30327-2636

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

**Transaction ID : C3184752**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

670.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 79 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Jay A Kaiser**Mailing Address CA Advanced Imaging Med Assoc Inc  
1260 S Eliseo Dr

City	State	Zip Code
Greenbrae	CA	94904-2009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193691**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. William M Kakimoto MD**

Mailing Address 426 N Granados Ave

City	State	Zip Code
Solana Beach	CA	92075-1215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193333**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. Russell A Kelley**

Mailing Address PO Box 585

City	State	Zip Code
Norwell	MA	02061-0585

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2015

**Transaction ID : C3183761**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

775.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Jason Lincoln Kelly**

Mailing Address 2603 S Clayton St

City

Denver

State

CO

Zip Code

80210-6208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mass General Hosp

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3642.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : C3194602**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Jason Lincoln Kelly**

Mailing Address 2603 S Clayton St

City

Denver

State

CO

Zip Code

80210-6208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mass General Hosp

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3642.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : C3194585**

Amount of Each Receipt this Period

3522.26

Full Name (Last, First, Middle Initial)

**C. Susan Lucille Kennedy**

Mailing Address 1116 Cowper Dr

City

Raleigh

State

NC

Zip Code

27608-2231

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2015

**Transaction ID : C3183790**

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3762.26



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Bart P Keogh**

Mailing Address 232 Belmont Ave E Apt 606

City	State	Zip Code
Seattle	WA	98102-6308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2015

**Transaction ID : C3193721**

Amount of Each Receipt this Period

1153.86

Full Name (Last, First, Middle Initial)

**B. Paritosh C Khanna MD**

Mailing Address 8745 Aero Dr Ste 200

City	State	Zip Code
San Diego	CA	92123-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193309**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. William Jay Kim MD**

Mailing Address 405 Golf Course Dr

City	State	Zip Code
Leonia	NJ	07605-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : C3180495**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

1776.93

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. William Jay Kim MD

Mailing Address 405 Golf Course Dr

City

Leonia

State

NJ

Zip Code

07605-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2015

Transaction ID : C3180522

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

B. William Jay Kim MD

Mailing Address 405 Golf Course Dr

City

Leonia

State

NJ

Zip Code

07605-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		29		2015

Transaction ID : C3183692

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

C. Yoonah Kim

Mailing Address 3305 Kline Dr.

City

Virginia Beach

State

VA

Zip Code

23452-6230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Center Radiologists, Inc

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		05		2015

Transaction ID : C3183866

Amount of Each Receipt this Period

249.99

SUBTOTAL of Receipts This Page (optional)..... ►

296.13

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Michael T King**

Mailing Address Radiology Consultants of Little Ro  
9601 Baptist Health Dr Ste 1100

City Little Rock State AR Zip Code 72205-6333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Consultants of Little Rock

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

10 / 12 / 2015

**Transaction ID : C3120007**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Amy Briana Kirby MD**

Mailing Address 14708 Hollyhock Dr

City Oklahoma City State OK Zip Code 73142-1804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eagle Eye Imaging

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

10 / 02 / 2015

**Transaction ID : C3109953**

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**C. Isaac Raymond Kirk III**

Mailing Address 3756 Westerman St

City Houston State TX Zip Code 77005-1168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Greater Houston Radiology Associates

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 10 / 2015

**Transaction ID : C3114195**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

835.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 84 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Steven Patrick Knight**

Mailing Address 1322 Burnett Station Rd

City

Seymour

State

TN

Zip Code

37865-3229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Association of University Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

**Transaction ID : C3122501**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Ralph Maximilian Koenker**

Mailing Address 14 Meadow Ridge

City

Corte Madera

State

CA

Zip Code

94925

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

765.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

**Transaction ID : C3193692**

Amount of Each Receipt this Period

255.00

Full Name (Last, First, Middle Initial)

**C. David Clifton Kolb**

Mailing Address 25 Talais Dr

City

Little Rock

State

AR

Zip Code

72223-9129

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

**Transaction ID : C3120011**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

630.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 85 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Keith E Kortman**Mailing Address San Diego Diagnostic Radiology  
PO Box 23540

City	State	Zip Code
San Diego	CA	92193-3540

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193310**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Amy Louise Kotsenas**

Mailing Address 721 12th Ave SW

City	State	Zip Code
Rochester	MN	55902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2015

**Transaction ID : C3119455**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Henryk M Kowalski**

Mailing Address 512 Chesapeake PI

City	State	Zip Code
Greenville	NC	27858-0678

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : C3193660**

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

776.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Jeffrey Paul Kramer**

Mailing Address 2147 Meadow Ridge Dr

City	State	Zip Code
Lancaster	PA	17601-5762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lancaster Radiology AssociatesOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2015

**Transaction ID : C3183853**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Peter Gerard Kruk MD**

Mailing Address 13419 Glencliff Way

City	State	Zip Code
San Diego	CA	92130-1313

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Emory Univ HospitalOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193311**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**c. Chad Gregory Kuhlman**

Mailing Address 4525 Stilesboro Rd NW

City	State	Zip Code
Kennesaw	GA	30152-3945

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Indiana Univ School of MedicineOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3184754**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 87 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Richard L Kundel**

Mailing Address PO Box 10112

City

Cedar Rapids

State

IA

Zip Code

52410-0112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2015

**Transaction ID : C3194555**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mark D Kuo**

Mailing Address 13026 E Turquoise Ave

City

Scottsdale

State

AZ

Zip Code

85259-5341

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

**Transaction ID : C3194535**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Andrew J Kurman**

Mailing Address 451 Lake of the Woods Blvd

City

Akron

State

OH

Zip Code

44333-2791

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cleveland Clinic Foundation

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

**Transaction ID : C3178613**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. David C Kushner**

Mailing Address 2020 Canal Rd

City

Virginia Beach

State

VA

Zip Code

23451-1615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Center Radiologists

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 05 / 2015

**Transaction ID : C3183867**

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**B. Brian S Kuszyk**

Mailing Address 3219 Old Oak Walk

City

Greenville

State

NC

Zip Code

27858-8441

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2015

**Transaction ID : C3193661**

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**C. Peter Kvamme**

Mailing Address 3924 Topside Road

City

Knoxville

State

TN

Zip Code

37920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St Francis Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 12 / 2015

**Transaction ID : C3122492**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

377.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Diem Kwong**

Mailing Address 218 Weaver Mine Trl

City

Chapel Hill

State

NC

Zip Code

27517-7589

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			05			2015					

**Transaction ID : C3183791**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. Geoffrey Glynn Laing MD**

Mailing Address 9018 Hemingway Grove Cir

City

Knoxville

State

TN

Zip Code

37922-8089

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Association of University Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			12			2015					

**Transaction ID : C3120156**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Paul Albert Leslie**

Mailing Address 260 Eshelman Rd

City

Lancaster

State

PA

Zip Code

17601-5645

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			08			2015					

**Transaction ID : C3183854**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

285.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 90 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Peter Lawrence Leuchtman MD**

Mailing Address 2900 Ryton Ct

City	State	Zip Code
Raleigh	NC	27613-5463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wake Radiology Consultants, P.A.Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183793**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Errol Lewis**

Mailing Address 6367 S Massey Hill Dr

City	State	Zip Code
Memphis	TN	38120-1407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mid-South Imaging & TherapeutiOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

**Transaction ID : C3193632**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. Gregory Kenneth Lewis**

Mailing Address 518 Chesapeake Pl

City	State	Zip Code
Greenville	NC	27858-0678

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eastern Radiologists IncOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : C3193662**

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

540.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Madelene C Lewis MD**

Mailing Address 105 N Shelmore Blvd

City

Mount Pleasant

State

SC

Zip Code

29464-2698

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical University of South Carolina

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

**Transaction ID : C3114320**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Arthur Eliot Li**

Mailing Address 4152 Willmar Dr

City

Palo Alto

State

CA

Zip Code

94306-3835

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Johns Hopkins Hosp-Johns Hopkins

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193693**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Gregory Matthew Lim**

Mailing Address 1552 Los Montes Dr

City

Burlingame

State

CA

Zip Code

94010-5964

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193694**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

200.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 92 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. David Ling**Mailing Address Wake Radiology  
PO Box 19368

City	State	Zip Code
Raleigh	NC	27619-9368

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

Transaction ID : C3183794

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Craig Laurence Lipman**

Mailing Address 10229 Poston Oak Cv

City	State	Zip Code
Collierville	TN	38017-8815

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid-South Imag &amp; Therapeutics

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : C3193642

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. H E Longmaid III**

Mailing Address 52 Harwich Rd

City	State	Zip Code
Chestnut Hill	MA	02467-3023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Deaconess Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2015

Transaction ID : C3180646

Amount of Each Receipt this Period

41.67

SUBTOTAL of Receipts This Page (optional)..... ►

455.67

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Russell N Low**

Mailing Address Sharp Memorial Hospital  
 7901 Frost St

City State Zip Code  
 San Diego CA 92123-2786

FEC ID number of contributing  
 federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2015

Transaction ID : C3193312

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Kay Denise Spong Lozano**

Mailing Address 5991 South High Court

City State Zip Code  
 Centennial CO 80121

FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Radiology Imaging Association

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5592.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 20 / 2015

Transaction ID : C3121693

Amount of Each Receipt this Period

209.00

Full Name (Last, First, Middle Initial)

**C. Kay Denise Spong Lozano**

Mailing Address 5991 South High Court

City State Zip Code  
 Centennial CO 80121

FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Radiology Imaging Association

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5592.03

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2015

Transaction ID : C3194586

Amount of Each Receipt this Period

3386.65

SUBTOTAL of Receipts This Page (optional)..... ►

4195.65

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Kay Denise Spong Lozano**

Mailing Address 5991 South High Court

City	State	Zip Code
Centennial	CO	80121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Association

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5592.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3194603**

Amount of Each Receipt this Period

115.38

Full Name (Last, First, Middle Initial)

**B. James Luethke**Mailing Address Radiology Imaging Associates  
10700 E Geddes Ave Ste 200

City	State	Zip Code
Englewood	CO	80112-3861

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3194604**

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

**C. James Luethke**Mailing Address Radiology Imaging Associates  
10700 E Geddes Ave Ste 200

City	State	Zip Code
Englewood	CO	80112-3861

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3194587**

Amount of Each Receipt this Period

1693.32

**SUBTOTAL** of Receipts This Page (optional)..... ►

1866.39

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Joseph Thomas Lurito**

Mailing Address Eastern Radiologists Inc

2101 W Arlington Blvd Ste 210

City

Greenville

State

NC

Zip Code

27834-5758

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

Transaction ID : C3193663

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**B. Jennifer Lyn Lynch**

Mailing Address 154 Forest Ave

City

Cohasset

State

MA

Zip Code

02025-1340

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

Transaction ID : C3183762

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Kenneth Parsons Lynch III**

Mailing Address 1320 West Wesley Rd

City

Atlanta

State

GA

Zip Code

30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

Transaction ID : C3186256

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

726.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 96 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. James W Lyon**Mailing Address Sharp Memorial Hosp  
7901 Frost St

City	State	Zip Code
San Diego	CA	92123-2701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193313**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Lisa Mabry**

Mailing Address 2538 Mountain Brook Cir

City	State	Zip Code
Mountain Brk	AL	35223-1108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Univ of Alabama Birmingham

Occupation

Diagnostic Radiologist RESIDENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

**Transaction ID : C3109979**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. James Elliott Machin**Mailing Address Mid-South Imaging & Therapeutics  
6305 Humphreys Blvd Ste 205

City	State	Zip Code
Memphis	TN	38120-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid-South Imaging &amp; Ther

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1249.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

**Transaction ID : C3193626**

Amount of Each Receipt this Period

583.31

**SUBTOTAL** of Receipts This Page (optional)..... ►

1283.31

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Michael R Macke MD**

Mailing Address 2855 Wildflower Rd

City

Cedar Rapids

State

IA

Zip Code

52411-4717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa, PLC

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 08 / 2015

Transaction ID : C3194556

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Lee Allen Madeline**

Mailing Address 111 Siena Dr

City

Greenville

State

SC

Zip Code

29609-3060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Greenville Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 23 / 2015

Transaction ID : C3178579

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Hubert Lynn Magill**

Mailing Address 2768 Oakleigh Ln

City

Germantown

State

TN

Zip Code

38138-7316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Division of Nuclear Medicine

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

10 / 09 / 2015

Transaction ID : C3193633

Amount of Each Receipt this Period

294.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

644.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. John L Mahoney**Mailing Address South Shore Hospital  
55 Fogg Rd

City	State	Zip Code
South Weymouth	MA	02190-2432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2015

**Transaction ID : C3183763**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Daniel Dawson Maki**

Mailing Address 9944 E South Bend Dr

City	State	Zip Code
Scottsdale	AZ	85255-2538

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southwest Diagnostic Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

**Transaction ID : C3194536**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Hiten Maganlal Malde**

Mailing Address 7 Kinkaid Ave

City	State	Zip Code
Closter	NJ	07624-2908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : C3180481**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

163.07

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Hiten Maganlal Malde**

Mailing Address 7 Kinkaid Ave

City	State	Zip Code
Closter	NJ	07624-2908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

Transaction ID : C3180508

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Hiten Maganlal Malde**

Mailing Address 7 Kinkaid Ave

City	State	Zip Code
Closter	NJ	07624-2908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

Transaction ID : C3183678

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Eric S Malden**

Mailing Address 3355 S Clayton Blvd

City	State	Zip Code
Englewood	CO	80113-7611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Associates, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

Transaction ID : C3194605

Amount of Each Receipt this Period

57.69

SUBTOTAL of Receipts This Page (optional)..... ▶

103.83

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 100 OF 185  
(check only one)

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Eric S Malden**

Mailing Address 3355 S Clayton Blvd

City	State	Zip Code
Englewood	CO	80113-7611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Imaging Associates, P.C.Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3194588**

Amount of Each Receipt this Period

1423.93

Full Name (Last, First, Middle Initial)

**B. Daniel B Maloney DO**

Mailing Address 19 Woodsvie Dr

City	State	Zip Code
Garnet Valley	PA	19060-1227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Christiana Care Health SystemOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

**Transaction ID : C3181812**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. David Steven Marcus**

Mailing Address 503 Georgetown Ave

City	State	Zip Code
San Mateo	CA	94402-2253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California Advanced ImagingOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193695**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2498.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Alexander S Mark**

Mailing Address Bethesda MRI

7830 Old Georgetown Rd Ste 40

City

Bethesda

State

MD

Zip Code

20814-2432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bethesda MRI&amp;CT and Virginia MRI

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

Transaction ID : C3121694

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. David C Marlow**

Mailing Address 7821 115th PI NE

City

Kirkland

State

WA

Zip Code

98033-6710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2015

Transaction ID : C3193722

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

**C. Eric M Martin**

Mailing Address 824 Lexington Dr

City

Greenville

State

NC

Zip Code

27834-0548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2015

Transaction ID : C3193664

Amount of Each Receipt this Period

126.00

SUBTOTAL of Receipts This Page (optional)..... ►

391.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ronald Jay Martin**

Mailing Address 110 Buckland Pl

City

Little Rock

State

AR

Zip Code

72223-4567

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

**Transaction ID : C3120012**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Alan D Massengill**Mailing Address Catawba Radiological Assoc  
PO Box 308

City

Hickory

State

NC

Zip Code

28603-0308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Catawba Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183822**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Terence A S Matalon**

Mailing Address 1606 Mount Pleasant Rd

City

Villanova

State

PA

Zip Code

19085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Albert Einstein Medical Center

Occupation

Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2015

**Transaction ID : C3122539**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

450.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. John Matzko**Mailing Address Wake Radiology  
3949 Browning Pl

City	State	Zip Code
Raleigh	NC	27609-6504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

**Transaction ID : C3183795**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Richard J Max**

Mailing Address 113 Baybrook Ct

City	State	Zip Code
Cary	NC	27511-9422

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

**Transaction ID : C3183796**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**c. Christopher C May**

Mailing Address 14627 E Paradise Dr

City	State	Zip Code
Fountain Hills	AZ	85268-6157

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

**Transaction ID : C3194537**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

290.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Jennifer P Mayberry**

Mailing Address 4009 Layang Layang Cir Unit E

City State Zip Code  
 Carlsbad CA 92008-4168

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2015

**Transaction ID : C3193334**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Mark D Mayhle**

Mailing Address 907 14th Ave E

City State Zip Code  
 Seattle WA 98112-3903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2015

**Transaction ID : C3193723**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. Joshua W McCain MD**

Mailing Address 19 Foot Point Rd

City State Zip Code  
 Columbia SC 29209-0846

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lexington Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2015

**Transaction ID : C3181791**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1450.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. James H McElmurray MD**

Mailing Address 6228 Hillsboro Pike

City

Nashville

State

TN

Zip Code

37215-5502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Association of University Radiologists

Occupation

Interventional Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

**Transaction ID : C3120173**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Geraldine B McGinty**

Mailing Address 131 Avenue B Apt 3C

City

New York

State

NY

Zip Code

10009-5029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Montefiore Imaging Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3110484**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**c. John G McGue**

Mailing Address 1453 Cotton Bounty Ct

City

Mount Pleasant

State

SC

Zip Code

29466-9092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Charleston Radiologists P.A.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary  
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2015

**Transaction ID : C3178926**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

475.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Michael McGuire**

Mailing Address 22 E 1st St Apt 403

City  
New YorkState  
NYZip Code  
10003-9379FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	01	/	2015

Transaction ID : C3180496

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**B. Michael McGuire**

Mailing Address 22 E 1st St Apt 403

City  
New YorkState  
NYZip Code  
10003-9379FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	15	/	2015

Transaction ID : C3180523

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**C. Michael McGuire**

Mailing Address 22 E 1st St Apt 403

City  
New YorkState  
NYZip Code  
10003-9379FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack

Occupation

Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	29	/	2015

Transaction ID : C3183693

Amount of Each Receipt this Period

9.61

SUBTOTAL of Receipts This Page (optional)..... ►

28.83

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 107 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Kathleen Moira McKenna**

Mailing Address 154 Gramercy Dr

City	State	Zip Code
San Mateo	CA	94402-1215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193696**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Susan E McKenzie**Mailing Address Medical Center Rads Inc  
5544 Greenwich Rd Ste 200

City	State	Zip Code
Virginia Beach	VA	23462-6563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Center Radiologists, I

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183868**

Amount of Each Receipt this Period

249.99

Full Name (Last, First, Middle Initial)

**C. Michael G McLaughlin**Mailing Address Eastern Radiologists Inc  
2101 W Arlington Blvd Ste 210

City	State	Zip Code
Greenville	NC	27834-5758

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : C3193665**

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

450.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 108 OF 185  
(check only one)

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Alan J McLeod**

Mailing Address 6377 Blue Heron Cove

City  
MemphisState  
TNZip Code  
38120-3216FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baptist Memorial Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

**Transaction ID : C3193634**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**B. Joseph William Melamed**

Mailing Address 220 Gilliam St

City  
OxfordState  
NCZip Code  
27565-3310FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

**Transaction ID : C3183797**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**C. Eric M Meredith MD**

Mailing Address 3636 8th Street PI NW

City  
HickoryState  
NCZip Code  
28601-8086FEC ID number of contributing  
federal political committee.

C

Name of Employer

Catawba Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

**Transaction ID : C3183823**

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

564.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 109 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Patricia J Mergo**

Mailing Address 400 N Harbor Lights Dr

City	State	Zip Code
Ponte Vedra Beach	FL	32081

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

**Transaction ID : C3194614**

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**B. Jeffrey S Miller**

Mailing Address 2366 Casa Hermosa Ct

City	State	Zip Code
Encinitas	CA	92024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Naval Hospital San Diego

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193335**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. Mitchell Alan Miller**Mailing Address 2 Constitution Court  
#1009

City	State	Zip Code
Hoboken	NJ	07030-6730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : C3180486**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

708.07

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mitchell Alan Miller**

Mailing Address 2 Constitution Court  
#1009

City State Zip Code  
Hoboken NJ 07030-6730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.61

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2015

**Transaction ID : C3180513**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Mitchell Alan Miller**

Mailing Address 2 Constitution Court  
#1009

City State Zip Code  
Hoboken NJ 07030-6730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.61

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 29 / 2015

**Transaction ID : C3183683**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Romney Miller MD, MS**

Mailing Address 610 Richland Ave

City State Zip Code  
Lafayette LA 70508-6617

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARG

Occupation

radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 23 / 2015

**Transaction ID : C3178578**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

296.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Stephen L Miller**

Mailing Address 8700 Sudley Rd

City

Manassas

State

VA

Zip Code

20110-4418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Virginia Radiology Associates, PC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2015

**Transaction ID : C3178847**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Michael Jason Milstein**

Mailing Address 3335 Brookview Dr

City

Eugene

State

OR

Zip Code

97401-1595

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Oregon Medical Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

**Transaction ID : C3122537**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**c. Slobodan Miseljic**

Mailing Address 20 Lawrence St

City

Boston

State

MA

Zip Code

02116-6211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

**Transaction ID : C3183764**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1350.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Zahirabbas A Momin MD**

Mailing Address 2141 Caneridge Dr SW

City	State	Zip Code
Marietta	GA	30064-4360

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Quantum RadiologistOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3186260**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Debra L Monticciolo**

Mailing Address 5015 Ascot Pkwy

City	State	Zip Code
Temple	TX	76502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Scott and White ClinicOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2015

**Transaction ID : C3178990**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Kirk L Moon JR**

Mailing Address 1642 16th Ave

City	State	Zip Code
San Francisco	CA	94122-3527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California Advanced Imaging Medical AsOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193697**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

825.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 113 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Garnetta I Morin-Ducote**

Mailing Address 1551 Wembly Hills Rd

City

Knoxville

State

TN

Zip Code

37922-8575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Univ Tennessee Med Ctr

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

**Transaction ID : C3120139**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Ellen B Morris**

Mailing Address 10 Eagle Dr

City

Canton

State

MA

Zip Code

02021-1573

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

**Transaction ID : C3183765**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Stephen David Morris**Mailing Address Mid-South Imaging & Therapeutics  
6305 Humphreys Blvd Ste 205

City

Memphis

State

TN

Zip Code

38120-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

**Transaction ID : C3193643**

Amount of Each Receipt this Period

294.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

494.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Demetrius Konstantine Morros**

Mailing Address 7418 Ridgcrest Court Rd

City

Birmingham

State

AL

Zip Code

35242-0525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Birmingham Radiological Group P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2015

**Transaction ID : C3110485**

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

**B. Joseph H Moyers**Mailing Address Quantum Radiology Northwest  
100 Galleria Pkwy SE Ste 1450

City

Atlanta

State

GA

Zip Code

30339-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

**Transaction ID : C3186261**

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**C. Bradley R Mullen MD**

Mailing Address 5314 E Orchid Ln

City

Paradise Valley

State

AZ

Zip Code

85253-2108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sun City Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2014

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2015

**Transaction ID : C3110327**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

583.34

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 115 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Bradley R Mullen MD**

Mailing Address 5314 E Orchid Ln

City

Paradise Valley

State

AZ

Zip Code

85253-2108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sun City Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

**Transaction ID : C3122395**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Joseph S Murphy**

Mailing Address 48 Hickory Hills Cir

City

Little Rock

State

AR

Zip Code

72212-2766

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 12 / 2015

**Transaction ID : C3120013**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Raymond August Murphy**

Mailing Address 13234 E. Paradise Dr

City

Scottsdale

State

AZ

Zip Code

85259

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Scottsdale Imaging

Occupation

Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 09 / 2015

**Transaction ID : C3194538**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

525.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 116 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas P Murphy MD**

Mailing Address 659 Gold Valley Pass

City

State

Zip Code

Canton

GA

30114-7775

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Quantum Radiologist

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

**Transaction ID : C3186262**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. John H Naheedy MD**

Mailing Address 5466 Soledad Rd

City

State

Zip Code

LA Jolla

CA

92037-7042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-employed

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193314**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. Jason Jonthan Naidich**

Mailing Address 300 Community Dr

City

State

Zip Code

Manhasset

NY

11030-3816

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

North Shore - LIJ Health System

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2015

**Transaction ID : C3118868**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1350.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mohit Madan Naik MD**

Mailing Address 424 W End Ave Apt 18C

City

New York

State

NY

Zip Code

10024-5785

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

**Transaction ID : C3180497**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Mohit Madan Naik MD**

Mailing Address 424 W End Ave Apt 18C

City

New York

State

NY

Zip Code

10024-5785

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

**Transaction ID : C3180524**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Mohit Madan Naik MD**

Mailing Address 424 W End Ave Apt 18C

City

New York

State

NY

Zip Code

10024-5785

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2015

**Transaction ID : C3183694**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

69.21

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Jennifer E Nathan**

Mailing Address 9891 Sunnybrook Dr

City	State	Zip Code
Great Falls	VA	22066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DOD

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2015

**Transaction ID : C3111750**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Timothy Craig Nauert**Mailing Address Mid-South Imaging & Therapeutics  
6305 Humphreys Blvd Ste 205

City	State	Zip Code
Memphis	TN	38120-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid-South Imag &amp; Therapeutics

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

**Transaction ID : C3193635**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. Adam Werley Nevitt**

Mailing Address 248 Granada Dr

City	State	Zip Code
Corte Madera	CA	94925-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

**Transaction ID : C3193698**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

419.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Tan Nguyen MD**

Mailing Address 7868 Via Teca

City	State	Zip Code
Carlsbad	CA	92009-8244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193336**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Clinton Rein Nichols**

Mailing Address 10131 Birchwood Dr

City	State	Zip Code
Huntington Beach	CA	92646-5432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193315**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**c. Brandi Tamara Nicholson MD**

Mailing Address 670 Tyree Ln

City	State	Zip Code
Charlottesville	VA	22901-3204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of Virginia

Occupation

Diagnostic Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

**Transaction ID : C3109954**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1225.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Gregory Neal Nicola**

Mailing Address 80 Riverside Blvd Apt 14P

City State Zip Code  
New York NY 10069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hackensack Radiology Group

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : C3180498**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Gregory Neal Nicola**

Mailing Address 80 Riverside Blvd Apt 14P

City State Zip Code  
New York NY 10069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hackensack Radiology Group

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

**Transaction ID : C3180525**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Gregory Neal Nicola**

Mailing Address 80 Riverside Blvd Apt 14P

City State Zip Code  
New York NY 10069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hackensack Radiology Group

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 29 / 2015

**Transaction ID : C3183695**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

69.21



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Gregory Karl Nicpon**

Mailing Address 2531 San Clemente Ave

City	State	Zip Code
Vista	CA	92084-5826

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Stanford University

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193337**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Steven R Nokes**Mailing Address Radiology Consultants of Little Ro  
9601 Baptist Health Dr Ste 1100

City	State	Zip Code
Little Rock	AR	72205-6333

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

**Transaction ID : C3120015**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Michael J Noud MD**

Mailing Address 3402 Piazza De Oro Way Ste 300

City	State	Zip Code
Oceanside	CA	92056-3787

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193338**

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1450.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Eveleen M Oleinik**

Mailing Address 1021 Downshire Chase

City

Virginia Beach

State

VA

Zip Code

23452-6154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Center Radiologists, Inc

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183869**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Thomas Wooten Oliver JR**

Mailing Address 155 Providence Blvd

City

Macon

State

GA

Zip Code

31210-7563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Macon

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2015

**Transaction ID : C3183420**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Walter Lauritz Olsen**

Mailing Address 8471 Sugarman Dr

City

La Jolla

State

CA

Zip Code

92037-2226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193316**

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional).....▶

1000.00

**TOTAL** This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Phat V Ong MD**

Mailing Address 24266 Rue De Gauguin

City State Zip Code  
 Laguna Niguel CA 92677-6108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Hackensack Radiology

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

10 / 01 / 2015

**Transaction ID : C3180478**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**B. Phat V Ong MD**

Mailing Address 24266 Rue De Gauguin

City State Zip Code  
 Laguna Niguel CA 92677-6108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Hackensack Radiology

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

10 / 15 / 2015

**Transaction ID : C3180505**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**c. Phat V Ong MD**

Mailing Address 24266 Rue De Gauguin

City State Zip Code  
 Laguna Niguel CA 92677-6108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Hackensack Radiology

Occupation  
 Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

10 / 29 / 2015

**Transaction ID : C3183675**

Amount of Each Receipt this Period

9.61

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

28.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Robert J Optican**

Mailing Address 9270 Gwynn Hollow Cv

City

Germantown

State

TN

Zip Code

38139-5687

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

**Transaction ID : C3193644**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**B. Dennis S Orwig**

Mailing Address 25 Wolfe Glen Way

City

Kentfield

State

CA

Zip Code

94904-1004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

**Transaction ID : C3193699**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**c. Allen K Oshita**Mailing Address California Pacific Medical Ctr  
PO Box 7999

City

San Francisco

State

CA

Zip Code

94120-7999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

**Transaction ID : C3193700**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

444.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Andrew W Osiason**

Mailing Address 506 Julie Ct

City

Wyckoff

State

NJ

Zip Code

07481-1101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : C3180499**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Andrew W Osiason**

Mailing Address 506 Julie Ct

City

Wyckoff

State

NJ

Zip Code

07481-1101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

**Transaction ID : C3180526**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Andrew W Osiason**

Mailing Address 506 Julie Ct

City

Wyckoff

State

NJ

Zip Code

07481-1101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

**Transaction ID : C3183696**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

69.21

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Randolph Kevin Otto**Mailing Address **Seattle Children's Hospital & Regi**  
**4800 Sand Point Way NE**

City	State	Zip Code
Seattle	WA	98105-3901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Children's University Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2015

**Transaction ID : C3180724**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Carroll Christopher Overton**Mailing Address **1116 Cowper Dr**

City	State	Zip Code
Raleigh	NC	27608-2231

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183798**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**C. Rodney S Owen**Mailing Address **9122 N 60th St**

City	State	Zip Code
Paradise Valley	AZ	85253-1735

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

**Transaction ID : C3194540**

Amount of Each Receipt this Period

90.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

460.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Virginia S Owen**

Mailing Address 620 Bray Station Rd

City	State	Zip Code
Collierville	TN	38017-3266

FEC ID number of contributing federal political committee.

C

Name of Employer

Mid-South Imag &amp; Therapeutics

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Transaction ID : C3193645

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**B. Chad Coletti Palmer**

Mailing Address 10678 E Palm Ridge Dr

City	State	Zip Code
Scottsdale	AZ	85255-1717

FEC ID number of contributing federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Transaction ID : C3194541

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**c. Neeraj Jitendra Panchal MD, BS**

Mailing Address 1801 Jackson St Apt 8

City	State	Zip Code
San Francisco	CA	94109-2852

FEC ID number of contributing federal political committee.

C

Name of Employer

San Diego Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

Transaction ID : C3193317

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

944.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 128 OF 185  
(check only one)

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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. David Panush**

Mailing Address 538 E 84th St Apt 4E

City  
New YorkState  
NYZip Code  
10028-7357FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		01		2015

Transaction ID : C3180487

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. David Panush**

Mailing Address 538 E 84th St Apt 4E

City  
New YorkState  
NYZip Code  
10028-7357FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2015

Transaction ID : C3180514

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. David Panush**

Mailing Address 538 E 84th St Apt 4E

City  
New YorkState  
NYZip Code  
10028-7357FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		29		2015

Transaction ID : C3183684

Amount of Each Receipt this Period

23.07

SUBTOTAL of Receipts This Page (optional)..... ►

69.21

TOTAL This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 129 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ranganathan Parthasarathy**

Mailing Address 9725 Legends Dr

City

Germantown

State

TN

Zip Code

38139-6969

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		0	9		2	0	1	5		

**Transaction ID : C3193627**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**B. Amit V Patel MD**

Mailing Address 636 Doris Pl

City

Ridgewood

State

NJ

Zip Code

07450-5312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		0	1		2	0	1	5		

**Transaction ID : C3180488**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**C. Amit V Patel MD**

Mailing Address 636 Doris Pl

City

Ridgewood

State

NJ

Zip Code

07450-5312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	5		2	0	1	5		

**Transaction ID : C3180515**

Amount of Each Receipt this Period

9.61

**SUBTOTAL** of Receipts This Page (optional)..... ►

313.22

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Amit V Patel MD**

Mailing Address 636 Doris Pl

City

Ridgewood

State

NJ

Zip Code

07450-5312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				29				2015					

**Transaction ID : C3183685**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**B. Dhiren Y Patel MD**

Mailing Address 1041 Bluestone Dr

City

Lititz

State

PA

Zip Code

17543-6900

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates, Ltd.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				08				2015					

**Transaction ID : C3183859**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**c. Divyesh Gaju Patel MD**

Mailing Address 1143 Treadway Rd

City

Munster

State

IN

Zip Code

46321-2856

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiologic Associates of Northwest Ind

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				20				2015					

**Transaction ID : C3121695**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

159.61

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 131 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Kiran R Patel MD**

Mailing Address 23 Shepard

City	State	Zip Code
Irvine	CA	92620-2894

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193339**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Rita S Patel**

Mailing Address 3 Ware Rd

City	State	Zip Code
Upper Saddle River	NJ	07458-1919

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

**Transaction ID : C3180489**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Rita S Patel**

Mailing Address 3 Ware Rd

City	State	Zip Code
Upper Saddle River	NJ	07458-1919

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

**Transaction ID : C3180516**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

646.14

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 132 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Rita S Patel**

Mailing Address 3 Ware Rd

City

Upper Saddle River

State

NJ

Zip Code

07458-1919

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	1	5

Transaction ID : C3183686

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Sean David Paulsen MD**

Mailing Address 250 W 300 N

City

Roosevelt

State

UT

Zip Code

84066-2336

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	1	5

Transaction ID : C3183406

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Mark L Pedersen**

Mailing Address 3013 Old Orchard Rd NE

City

Cedar Rapids

State

IA

Zip Code

52402-6801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	1	5

Transaction ID : C3194557

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶

623.07

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Jeffrey Wilson Peeke MD**

Mailing Address 12254 Warrior Trl

City

Knoxville

State

TN

Zip Code

37922-5461

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiologist

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2015			

**Transaction ID : C3122467**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Ray Peeples III**

Mailing Address 14524 Cantrell Rd Ste 140

City

Little Rock

State

AR

Zip Code

72223-4673

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of Arkansas Medical Science

Occupation

Radiology Resident

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2015			

**Transaction ID : C3120124**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. W Dale Perrymore**

Mailing Address 6 Courts Dr

City

Little Rock

State

AR

Zip Code

72223-9021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2015			

**Transaction ID : C3120126**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

625.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 134 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Peter Tobias Petruzzu JR**

Mailing Address 1148 Andalusian Way

City

Knoxville

State

TN

Zip Code

37922-7639

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Association of University Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

**Transaction ID : C3122494**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Robert V Pham MD**

Mailing Address 215 Pineland Rd NW

City

Atlanta

State

GA

Zip Code

30342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Emory Univ Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3186281**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Jean-Pierre Phancao MD**

Mailing Address 3700 California St

City

San Francisco

State

CA

Zip Code

94118-1618

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193701**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

450.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 OF 185  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Douglas William Picton**

Mailing Address 1911 NC Highway 121

City State Zip Code  
Greenville NC 27834-7187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eastern Radiologists

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2015

**Transaction ID : C3193666**

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**B. Sean Donovan Pierce**

Mailing Address 509 48th Ave Apt 2A

City State Zip Code  
Long Island City NY 11101-5604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hackensack Radiology Group

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : C3180500**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Sean Donovan Pierce**

Mailing Address 509 48th Ave Apt 2A

City State Zip Code  
Long Island City NY 11101-5604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hackensack Radiology Group

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

**Transaction ID : C3180527**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

186.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 136 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Sean Donovan Pierce**

Mailing Address 509 48th Ave Apt 2A

City

Long Island City

State

NY

Zip Code

11101-5604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	1	5

**Transaction ID : C3183697**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. William Bradley Pierce**

Mailing Address 3 Windsor Ct

City

Little Rock

State

AR

Zip Code

72212-3214

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	1	5

**Transaction ID : C3120127**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Sean Patrick Pinnell MD**

Mailing Address PO Box 7221

City

Rancho Santa Fe

State

CA

Zip Code

92067-7221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UCSD Med Ctr-Univ of CA, San Diego

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	5

**Transaction ID : C3193340**

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

880.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 137 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Julie Christine Pondrom MD**

Mailing Address 4511 Cather Ave

City

San Diego

State

CA

Zip Code

92122-2601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193318**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Donald Ponec**

Mailing Address 7912 Corte Penca

City

Carlsbad

State

CA

Zip Code

92009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tri-City Medical Center

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193341**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. Patricia Sims Poole MD**

Mailing Address 911 Stratford Dr

City

Encinitas

State

CA

Zip Code

92024-4552

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Synergy Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193319**

Amount of Each Receipt this Period

480.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1680.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 138 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Charles V Pope**

Mailing Address 1408 Olive Chapel Road

City	State	Zip Code
Apex	NC	27502-8511

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Wake Radiology Consultants, P.A.

 Occupation  
 Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

Transaction ID : C3183799

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Jeffrey Michael Potter MD**

Mailing Address 1803 Bloomsbury Rd

City	State	Zip Code
Greenville	NC	27858-9617

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Eastern Radiologists

 Occupation  
 Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

Transaction ID : C3193667

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**C. Robert Jay Prager**

Mailing Address 2330 Avenida de la Playa

City	State	Zip Code
La Jolla	CA	92037-3201

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 San Diego Imaging Medical Group

 Occupation  
 Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

Transaction ID : C3193320

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

846.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ori Preis MD**

Mailing Address 60 Charlotte Rd

City State Zip Code  
Newton MA 02459-1708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 02 / 2015

**Transaction ID : C3183766**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Thomas Lemuel Presson JR**

Mailing Address 6532 Wakefalls Dr

City State Zip Code  
Wake Forest NC 27587-9593

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2015

**Transaction ID : C3183800**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**c. Philip C Pretter**

Mailing Address 12325 Camberwell Ct

City State Zip Code  
Raleigh NC 27614-8933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2015

**Transaction ID : C3183801**

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

280.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Michael L Puckett**

Mailing Address 15581 Hidden Valley Dr

City	State	Zip Code
Poway	CA	92064-5230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
San Diego Imaging Medical GroupOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

Transaction ID : C3193321

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Joel I Rakow**

Mailing Address 505 Ivy Lane

City	State	Zip Code
Wyckoff	NJ	07481-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hackensack Radiology GroupOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

Transaction ID : C3180501

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Joel I Rakow**

Mailing Address 505 Ivy Lane

City	State	Zip Code
Wyckoff	NJ	07481-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hackensack Radiology GroupOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Transaction ID : C3180528

Amount of Each Receipt this Period

23.07

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

646.14

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Joel I Rakow**

Mailing Address 505 Ivy Lane

City State Zip Code  
 Wyckoff NJ 07481-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Hackensack Radiology Group

Occupation  
 Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 29 2015

**Transaction ID : C3183698**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Sunil Kumar Ram**

Mailing Address 12455 N 118th Way

City State Zip Code  
 Scottsdale AZ 85259-2718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Scottsdale Medical Imaging

Occupation  
 Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 09 2015

**Transaction ID : C3194542**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Vikram A Rao MD**

Mailing Address 14348 Manderleigh Woods Dr

City State Zip Code  
 Town and Country MO 63017-8056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 West County Radiological Group

Occupation  
 Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 01 2015

**Transaction ID : C3183715**

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

165.07

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 142 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Eric C Rautiola**

Mailing Address PO Box 308

City	State	Zip Code
Hickory	NC	28603-0308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catawba Radiological Associates, Inc.Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183824**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. James Vincent Rawson**

Mailing Address 718 Marsh Point Rd

City	State	Zip Code
Evans	GA	30809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Medical College of GeorgiaOccupation  
Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

716.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3110922**

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

**C. James Vincent Rawson**

Mailing Address 718 Marsh Point Rd

City	State	Zip Code
Evans	GA	30809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Medical College of GeorgiaOccupation  
Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

716.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2015

**Transaction ID : C3181022**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

283.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Terry A Reeves**

Mailing Address 10537 E Sunnyside Dr

City

Scottsdale

State

AZ

Zip Code

85259-2917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

**Transaction ID : C3194543**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Stuart Benjamin Resnick MD**

Mailing Address 1210 Regency Rd NW

City

Atlanta

State

GA

Zip Code

30327-2722

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiologist

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3186288**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. James Stirling Rickards MD**

Mailing Address 1266 NW Countryside Ct

City

McMinnville

State

OR

Zip Code

97128-9528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McMinnville Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3179116**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

540.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Robert J Rienzo**
 Mailing Address Medical Imaging at Lehigh Valley  
 1200 S Cedar Crest Blvd

City	State	Zip Code
Allentown	PA	18103-6248

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 medical imaging of lehigh valley

 Occupation  
 radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : C3178392

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Kenneth Vance Robbins**
 Mailing Address Radiology Consultants  
 9601 Baptist Health Dr Ste 1100

City	State	Zip Code
Little Rock	AR	72205-6333

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Radiology Consultants of Little Rock+

 Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

Transaction ID : C3120128

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. James Edward Robertson**

Mailing Address 862 Oakton Pond Court

City	State	Zip Code
Marietta	GA	30064

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 VA Medical Center

 Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

Transaction ID : C3186291

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Joseph Judge Robinette MD**

Mailing Address 680 Lexington Dr

City

Greenville

State

NC

Zip Code

27834-7858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

**Transaction ID : C3193668**

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**B. Martin Jay Robinson**

Mailing Address 1515 Wetherborne Dr

City

Little Rock

State

AR

Zip Code

72211-6125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

**Transaction ID : C3120129**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Robert H Rosengart**

Mailing Address PO Box 26430

City

Macon

State

GA

Zip Code

31221-6430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RAM, PC

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

**Transaction ID : C3181133**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

626.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 146 OF 185  
(check only one)

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Michael L Ross**

Mailing Address 2901 Fairview Rd

City

Raleigh

State

NC

Zip Code

27608-1129

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	5			2	0	1	5		

**Transaction ID : C3183802**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Toni C Roth**

Mailing Address 7849 Stanford Ave

City

Saint Louis

State

MO

Zip Code

63130-3611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Central Illinois Neurosciences

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	1			2	0	1	5		

**Transaction ID : C3183716**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Eka Rozentsvayg DO**

Mailing Address 4 Horizon Rd Apt 1412

City

Fort Lee

State

NJ

Zip Code

07024-6728

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	1			2	0	1	5		

**Transaction ID : C3180502**

Amount of Each Receipt this Period

9.61

**SUBTOTAL** of Receipts This Page (optional)..... ►

179.61

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 147 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Eka Rozentsvayg DO**

Mailing Address 4 Horizon Rd Apt 1412

City	State	Zip Code
Fort Lee	NJ	07024-6728

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2015

Transaction ID : C3180529

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**B. Eka Rozentsvayg DO**

Mailing Address 4 Horizon Rd Apt 1412

City	State	Zip Code
Fort Lee	NJ	07024-6728

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		29		2015

Transaction ID : C3183699

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**C. Edna M Ruiz**

Mailing Address Romany Park C-4 3rd St

City	State	Zip Code
San Juan	PR	00926

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VA Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2015

Transaction ID : C3179666

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

44.22

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Philip Robert Saba**

Mailing Address 1017 Heydon Ct

City	State	Zip Code
Raleigh	NC	27614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology Consultants

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183803**

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

**B. Damon C Sacco**

Mailing Address PO Box 895

City	State	Zip Code
Sausalito	CA	94966-0895

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193702**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**c. Arthur D Sandy**

Mailing Address 2136 Peacock Lane

City	State	Zip Code
Birmingham	AL	35223-1708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Advanced Imaging Assoc of AL

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2015

**Transaction ID : C3179667**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

415.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Nicole Saphier MD**

Mailing Address 24 Canfield Rd

City State Zip Code  
Morristown NJ 07960-6920

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Summit Medical Group Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2015

**Transaction ID : C3116099**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Joshua Michael Sapire**

Mailing Address 91 Deer Run Rd

City State Zip Code  
Woodbridge CT 06525-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Advanced Radiology Consultants Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 24 / 2015

**Transaction ID : C3178654**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Richard R Saxon**

Mailing Address 2591 White Owl Dr

City State Zip Code  
Encinitas CA 92024-6557

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
North County Radiology Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

**Transaction ID : C3193342**

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1350.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 150 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ronald Merle Sayers MD**

Mailing Address 1807 Bloomsbury Rd

City  
GreenvilleState  
NCZip Code  
27858-9617FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : C3193669**

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**B. Charles D Scheil**

Mailing Address 281 44th Avenue Cir NW

City  
HickoryState  
NCZip Code  
28601-9016FEC ID number of contributing  
federal political committee.

C

Name of Employer

Catawba Radiological Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183825**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**c. Meir H Scheinfeld MD, Ph.D**

Mailing Address 536 Route 306

City  
SuffernState  
NYZip Code  
10901-2109FEC ID number of contributing  
federal political committee.

C

Name of Employer

Montefiore Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3179526**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

326.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Howard R Schiffman**

Mailing Address 4066 Caminito Cassis

City

San Diego

State

CA

Zip Code

92122-1995

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193322**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Stephen Phillip Schmitter**Mailing Address San Diego Imaging Medical Group  
3402 Piazza De Oro Way Ste 300

City

Oceanside

State

CA

Zip Code

92056-3787

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Associated Radiologists LTD

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

**Transaction ID : C3193343**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. Kurt A Schoppe**

Mailing Address 3212 Heritage Cv

City

Grapevine

State

TX

Zip Code

76051-1104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of North Texas

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

**Transaction ID : C3179676**

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

2700.00

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. John Schrupf

Mailing Address 61 Chanticleer St

City

Larkspur

State

CA

Zip Code

94939-1515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2015

Transaction ID : C3193703

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. David I Schulz MD

Mailing Address 104 Academy Ridge Dr

City

Durham

State

NC

Zip Code

27705-5598

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2015

Transaction ID : C3183805

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Gary David Schweiger

Mailing Address Radiology Consultants Of Iowa  
1948 1st Ave NE

City

Cedar Rapids

State

IA

Zip Code

52402-5377

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa, PLC

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 08 / 2015

Transaction ID : C3194559

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Christopher P Sebrechts**Mailing Address San Diego Diagnostic Radiology  
PO Box 23540

City	State	Zip Code
San Diego	CA	92193-3540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
San Diego Imaging Medical GroupOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2015

Transaction ID : C3193323

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. James E Selis**

Mailing Address 22250 Providence Dr Ste 207

City	State	Zip Code
Southfield	MI	48075-6210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southfield Radiology AssociatesOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : C3183386

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

**C. Ali R Sepahdari MD**

Mailing Address 11826 Dorothy St Apt 301

City	State	Zip Code
Los Angeles	CA	90049-5384

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UCLA

Occupation  
Diagnostic Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Transaction ID : C3180760

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1065.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 154 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Heather Marie Seymour MD

Mailing Address 9 Doctors Park

City	State	Zip Code
Greenville	NC	27834-2801

FEC ID number of contributing federal political committee.

C

Name of Employer  
Eastern Radiologists Inc.

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

Transaction ID : C3193670

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

B. Nancy Marie Sherwin

Mailing Address The Lankenau Hospital  
100 E Lancaster Ave

City	State	Zip Code
Wynnewood	PA	19096-3483

FEC ID number of contributing federal political committee.

C

Name of Employer  
Radiology Associates of the Main Line

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2015

Transaction ID : C3183842

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

c. Leigh S Shuman

Mailing Address 1182 Oakmont Dr

City	State	Zip Code
Lancaster	PA	17601-5079

FEC ID number of contributing federal political committee.

C

Name of Employer  
Lancaster Radiology Associates

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

Transaction ID : C3183856

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

216.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Derrick Siebert MD**

Mailing Address PO Box 1012

City

Wausau

State

WI

Zip Code

54402-1012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Wausau

Occupation

Diagnostic and Interventional Radiolog

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2130.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

Transaction ID : C3109095

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Derrick Siebert MD**

Mailing Address PO Box 1012

City

Wausau

State

WI

Zip Code

54402-1012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Wausau

Occupation

Diagnostic and Interventional Radiolog

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2130.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

Transaction ID : C3179005

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Joel S Sigeti**

Mailing Address 11075 Montaubon Cir

City

San Diego

State

CA

Zip Code

92131-3685

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

Transaction ID : C3193324

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

730.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 156 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Martin Lawrence Silbiger JR**

Mailing Address 1335 Draycott PI NW

City State Zip Code  
Atlanta GA 30327-1863

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : C3186294**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mark Ian Silverstein**

Mailing Address 418 Spring House Cv NE

City State Zip Code  
Atlanta GA 30307-1187

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : C3186297**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. J Thayer Simmons**

Mailing Address 6310 Mossway

City State Zip Code  
Baltimore MD 21212-2218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 31 / 2015

**Transaction ID : C3183426**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. James H Sloves**

Mailing Address PO Box 8049

City

State

Zip Code

Incline Village

NV

89450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self employed contracted with vRad

Occupation

Diagnostic Radiologist

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

Transaction ID : C3181139

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Eric David Smith**

Mailing Address 678 6th Ave

City

State

Zip Code

San Francisco

CA

94118-3805

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

Transaction ID : C3193704

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**c. Gregory B Smith**

Mailing Address 7810 Bamby Rd

City

State

Zip Code

Cumming

GA

30041-8100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology, N.W.

Occupation

Diagnostic Radiologist

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

Transaction ID : C3186300

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

825.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 158 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Todd Mikel Smith**

Mailing Address 18 Masters Cir

City

Little Rock

State

AR

Zip Code

72212-3304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

**Transaction ID : C3120131**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. John J Snidow**

Mailing Address 9207 Double Eagle Ln

City

Knoxville

State

TN

Zip Code

37922-5989

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Association of University Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

**Transaction ID : C3120174**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Andrew H Sonin**

Mailing Address 1083 Rutherford Way

City

Highlands Ranch

State

CO

Zip Code

80126-4762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Associates, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

**Transaction ID : C3194606**

Amount of Each Receipt this Period

57.69

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

432.69

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Andrew H Sonin**

Mailing Address 1083 Rutherford Way

City State Zip Code  
 Highlands Ranch CO 80126-4762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Radiology Imaging Associates, P.C.

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1751.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2015

**Transaction ID : C3194589**

Amount of Each Receipt this Period

1693.33

Full Name (Last, First, Middle Initial)

**B. John M Spargo**

Mailing Address Wake Radiology  
 3949 Browning Pl

City State Zip Code  
 Raleigh NC 27609-6504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Wake Radiology Consultants, P.A.

Occupation  
 Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : C3183806**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**c. Adam Wayne Specht**

Mailing Address 3309 Chappell Pl

City State Zip Code  
 Virginia Beach VA 23452-6290

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCR, Inc

Occupation  
 Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

777.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : C3183871**

Amount of Each Receipt this Period

333.33

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2146.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas E St Amour**

Mailing Address Radiology Consultants

9601 Baptist Health Dr Ste 1100

City

Little Rock

State

AR

Zip Code

72205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

**Transaction ID : C3120130**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Gail E Starr**

Mailing Address Hackensack Univ Med Ctr

20 Prospect Ave Ste 513

City

Hackensack

State

NJ

Zip Code

07601-1962

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : C3180482**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**C. Gail E Starr**

Mailing Address Hackensack Univ Med Ctr

20 Prospect Ave Ste 513

City

Hackensack

State

NJ

Zip Code

07601-1962

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

**Transaction ID : C3180509**

Amount of Each Receipt this Period

9.61

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

269.22



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 161 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Gail E Starr**
 Mailing Address Hackensack Univ Med Ctr  
 20 Prospect Ave Ste 513

City	State	Zip Code
Hackensack	NJ	07601-1962

FEC ID number of contributing federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

Transaction ID : C3183679

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**B. Eric J Stein**
 Mailing Address Bryn Mawr Hospital  
 130 S Bryn Mawr Ave

City	State	Zip Code
Bryn Mawr	PA	19010-3143

FEC ID number of contributing federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

866.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2015

Transaction ID : C3183843

Amount of Each Receipt this Period

108.34

Full Name (Last, First, Middle Initial)

**c. C Ryan Steinbaker MD**

Mailing Address 2859 Drake Mallard Dr

City	State	Zip Code
Grimesland	NC	27837-9509

FEC ID number of contributing federal political committee.

C

Name of Employer

Eastern Radiologists Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

Transaction ID : C3193671

Amount of Each Receipt this Period

126.00

SUBTOTAL of Receipts This Page (optional)..... ►

243.95

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Michael A Steiner MD**

Mailing Address 103 Catherine Cv

City

Madison

State

MS

Zip Code

39110-4510

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of Mississippi

Occupation

Diagnostic Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2015

**Transaction ID : C3115569**

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

**B. William J Steines**

Mailing Address Radiology Imaging Assoc  
10700 e Geddes Ave Ste 200

City

Englewood

State

CO

Zip Code

80112-3861

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates PC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1077.57

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : C3194590**

Amount of Each Receipt this Period

1077.57

Full Name (Last, First, Middle Initial)

**c. Susan Kathryn Stevens**

Mailing Address 1040 Bridle Way

City

Hillsborough

State

CA

Zip Code

94010-7406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cal Advanced Imaging Med. Assoc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2015

**Transaction ID : C3193705**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1215.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 163 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. James Palmer Strain**

Mailing Address 2 Avery St Apt 31A

City  
BostonState  
MAZip Code  
02111-1017FEC ID number of contributing  
federal political committee.

C

Name of Employer

New England Medical Center

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	02	/	2015

**Transaction ID : C3183767**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Robert Lloyd Stuckey MD**

Mailing Address 8506 Berry Patch Ln

City  
RolandState  
ARZip Code  
72135-9002FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	12	/	2015

**Transaction ID : C3120132**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. Jeremy S Stupin MD**

Mailing Address 3402 Piazza De Oro Way Ste 300

City  
OceansideState  
CAZip Code  
92056-3787FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193344**

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

950.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 164 OF 185  
(check only one)

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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Richard F Sullivan**

Mailing Address 117 Bates Way

City

Hanover

State

MA

Zip Code

02339-1597

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Department of Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

**Transaction ID : C3183768**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Richard Ray Sullivan**

Mailing Address 2220 Via Acalones

City

Palos Verdes Estates

State

CA

Zip Code

90274-1647

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Advanced Imaging of South Bay

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2015

**Transaction ID : C3178811**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Sunitha Sunkavalli**

Mailing Address 943 High Mountain Rd

City

Franklin Lakes

State

NJ

Zip Code

07417-1619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

**Transaction ID : C3180503**

Amount of Each Receipt this Period

9.61

**SUBTOTAL** of Receipts This Page (optional)..... ►

609.61

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 165 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Sunitha Sunkavalli**

Mailing Address 943 High Mountain Rd

City

Franklin Lakes

State

NJ

Zip Code

07417-1619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

**Transaction ID : C3180530**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**B. Sunitha Sunkavalli**

Mailing Address 943 High Mountain Rd

City

Franklin Lakes

State

NJ

Zip Code

07417-1619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

**Transaction ID : C3183700**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**C. James N Suojanen**Mailing Address South Shore Hospital  
55 Fogg Rd

City

South Weymouth

State

MA

Zip Code

02190-2455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2015

**Transaction ID : C3183769**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.22

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Paul Russell Tanner**Mailing Address Mid-South Imaging & Therapeutics  
6305 Humphreys Blvd Ste 205

City	State	Zip Code
Memphis	TN	38120-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid-South Imaging &amp; Therapeutics, P.A.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

**Transaction ID : C3193646**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Knox Randolph Tate**

Mailing Address 809 8th Ave NW

City	State	Zip Code
Hickory	NC	28601-3548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Catawba Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183826**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. William H Taylor**

Mailing Address 4045 E Desert Crest Dr

City	State	Zip Code
Paradise Valley	AZ	85253-3942

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

**Transaction ID : C3194544**

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

535.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Deanna Faye Taylor-Gantte**

Mailing Address PO Box 1101

City

Dandridge

State

TN

Zip Code

37725-1101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Association of University Radiologists

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 12 / 2015

**Transaction ID : C3120138**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Shawn DeWayne Teague**

Mailing Address 11844 Tarver Ct

City

Fishers

State

IN

Zip Code

46037-8277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Indiana Univ School of Medicine

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2015

**Transaction ID : C3194613**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Anthony Grant Thaxton MD**

Mailing Address 548 Westminster Cir

City

Greenville

State

NC

Zip Code

27858-9600

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2015

**Transaction ID : C3193672**

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

351.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 OF 185

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Lloyd R Thomas JR**

Mailing Address Mid-South Imaging &amp; Therapeutics

6305 Humphreys Blvd Ste 205

City

Memphis

State

TN

Zip Code

38120-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

627.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

**Transaction ID : C3193636**

Amount of Each Receipt this Period

291.69

Full Name (Last, First, Middle Initial)

**B. Richard John Thomas**

Mailing Address 1431 Kemp Bridge Ln

City

Chesapeake

State

VA

Zip Code

23320-5056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Center Radiologists, Inc

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183872**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Jeffrey L Thomasson**

Mailing Address 3 Brookside Ln

City

Saint Louis

State

MO

Zip Code

63124-1814

FEC ID number of contributing  
federal political committee.

C

Name of Employer

West County Radiological Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : C3183717**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

516.69



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 169 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Allen K Tonkin**

Mailing Address 3415 Chambers Chapel Rd

City

Lakeland

State

TN

Zip Code

38002-9573

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid-South Imaging &amp; Therapy PA

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	1	5

Transaction ID : C3193628

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**B. Keith A Tonkin MD**

Mailing Address 1020 Island Dr

City

Memphis

State

TN

Zip Code

38103-8989

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	1	5

Transaction ID : C3193623

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. Patrick J Toth**

Mailing Address 201 E 80th St Apt 8F

City

New York

State

NY

Zip Code

10021-0515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

Transaction ID : C3180479

Amount of Each Receipt this Period

23.07

SUBTOTAL of Receipts This Page (optional)..... ►

611.07

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 170 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Patrick J Toth**

Mailing Address 201 E 80th St Apt 8F

City

New York

State

NY

Zip Code

10021-0515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

**Transaction ID : C3180506**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Patrick J Toth**

Mailing Address 201 E 80th St Apt 8F

City

New York

State

NY

Zip Code

10021-0515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

**Transaction ID : C3183676**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Steven Robert Urbanski**

Mailing Address 67 Marbern Drive

City

Suffield

State

CT

Zip Code

06078-1532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jefferson Radiology Group, PC

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary  
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2015

**Transaction ID : C3178902**

Amount of Each Receipt this Period

525.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

571.14

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. William J Vanarthos**Mailing Address Wake Radiology Consultants P.A.  
3949 Browning Pl

City	State	Zip Code
Raleigh	NC	27609-6504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology Consultants P.A.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183808**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Augustus Guinn Vaughn JR**

Mailing Address 5375 Thornapple Lane NW

City	State	Zip Code
Acworth	GA	30101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3186302**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Brant Stuart Vincent**

Mailing Address 1305 Glen Cedars Dr

City	State	Zip Code
Mableton	GA	30126-7604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3186303**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 172 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Daniel N Vinocur MD**

Mailing Address 615 C Ave

City	State	Zip Code
Coronado	CA	92118-2229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Children's Hospital Boston

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193345**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Roger Vithalani**

Mailing Address 516 Chesapeake Place

City	State	Zip Code
Greenville	NC	27858-0678

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : C3193673**

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**C. Peter R Wahba MD**

Mailing Address 261 Woodhill Ln

City	State	Zip Code
Media	PA	19063-1964

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2015

**Transaction ID : C3183844**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

766.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Eric Alfred Walker**

Mailing Address 663 Waltonville Rd

City

Hummelstown

State

PA

Zip Code

17036-9001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hershey Medical Center

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 08 / 2015

**Transaction ID : C3113110**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Bobby Clifton Walters JR**

Mailing Address 2231 Lexington Farms Court

City

Greenville

State

NC

Zip Code

27834-7765

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

10 / 21 / 2015

**Transaction ID : C3193674**

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**C. M Terry Ward**

Mailing Address 1044 Woodruff Plantation Pkwy SE

City

Marietta

State

GA

Zip Code

30067-9106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

10 / 26 / 2015

**Transaction ID : C3186304**

Amount of Each Receipt this Period

365.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

741.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 174 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Anoop S Wattamwar**

Mailing Address 443 Wilfred Ter

City	State	Zip Code
Cliffside Park	NJ	07010-1401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

Transaction ID : C3180490

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**B. Anoop S Wattamwar**

Mailing Address 443 Wilfred Ter

City	State	Zip Code
Cliffside Park	NJ	07010-1401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Transaction ID : C3180517

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**C. Anoop S Wattamwar**

Mailing Address 443 Wilfred Ter

City	State	Zip Code
Cliffside Park	NJ	07010-1401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack

Occupation

Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2015

Transaction ID : C3183687

Amount of Each Receipt this Period

9.61

SUBTOTAL of Receipts This Page (optional)..... ►

28.83

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. William Greene Way JR**

Mailing Address 7713 Oakmont Pl

City

Raleigh

State

NC

Zip Code

27615-5492

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2015			

**Transaction ID : C3183810**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. David Warren Weiss**

Mailing Address 5 Northwest Ct

City

Little Rock

State

AR

Zip Code

72212-1513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2015			

**Transaction ID : C3120133**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. Thomas Graham West MD**

Mailing Address 100 Rivercrest Dr

City

Greenville

State

NC

Zip Code

27858-9300

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2015			

**Transaction ID : C3193675**

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

496.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Simon Westacott**

Mailing Address 1965 Glendower Dr

City

Lancaster

State

PA

Zip Code

17601-4945

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

**Transaction ID : C3183860**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Mark L Wetherly**

Mailing Address 2074 Kinsmon Dr

City

Marietta

State

GA

Zip Code

30062-8135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

**Transaction ID : C3186305**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Patrick Noel Weybright**

Mailing Address 1234 Mastersonville Rd

City

Manheim

State

PA

Zip Code

17545-9461

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

**Transaction ID : C3183858**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

500.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 177 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Richard L Wheat**

Mailing Address Sequoia Hospital

170 Alameda De Las Pulgas

City

Redwood City

State

CA

Zip Code

94062-2799

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2015



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193706**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Alan Dewayne Williams**

Mailing Address 55 Robinwood Dr

City

Little Rock

State

AR

Zip Code

72227-2238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Little Rock

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2015

**Transaction ID : C3120134**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. John E Williams**

Mailing Address 1108 Hazeltine Ln NW

City

Kennesaw

State

GA

Zip Code

30152-4742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

**Transaction ID : C3186306**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

825.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 178 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. John S Wilson JR**

Mailing Address 15 Arcadia Pl

City	State	Zip Code
Hillsborough	CA	94010-7010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California Advanced ImagingOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : C3193707**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Dexter H Witte**

Mailing Address 441 Goodwyn St

City	State	Zip Code
Memphis	TN	38111-3311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mid-South Imag & TherapeuticsOccupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

**Transaction ID : C3193647**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. Mark D Wittry**

Mailing Address 10525 Concord School Rd

City	State	Zip Code
Saint Louis	MO	63128-1232

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
West County Radiological Group, Inc.Occupation  
Cardiac Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2015

**Transaction ID : C3112914**

Amount of Each Receipt this Period

83.34

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

452.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Andrew J Woodrow MD**

Mailing Address 3592 Elmwood Beach Rd

City

Middleville

State

MI

Zip Code

49333-8769

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Advanced Radiology Services

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	8		2	0	1	5		

**Transaction ID : C3181021**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Vanessa Albernaz Workman**

Mailing Address 507 Guilder Ln

City

Greenville

State

NC

Zip Code

27858-6581

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Radiologists Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	1		2	0	1	5		

**Transaction ID : C3193650**

Amount of Each Receipt this Period

126.00

Full Name (Last, First, Middle Initial)

**C. Scott Robert Wottrich**

Mailing Address 2886 Observation Pt NW

City

Marietta

State

GA

Zip Code

30064-1271

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Emory Univ Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	6		2	0	1	5		

**Transaction ID : C3186307**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1376.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Andrew C Wu**

Mailing Address 8729 Valentine Ct

City  
RaleighState  
NCZip Code  
27615-5830FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

**Transaction ID : C3183812**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Robert Charles Yacullo JR**

Mailing Address 450 Lirio St

City

Solana Beach

State

CA

Zip Code

92075-2019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : C3193346**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**c. Clement Yang MD**

Mailing Address 555 W 59th St Apt 19E

City

New York

State

NY

Zip Code

10019-1241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : C3180483**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

743.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 181 OF 185

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Clement Yang MD**

Mailing Address 555 W 59th St Apt 19E

City

New York

State

NY

Zip Code

10019-1241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Transaction ID : C3180510

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Clement Yang MD**

Mailing Address 555 W 59th St Apt 19E

City

New York

State

NY

Zip Code

10019-1241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2015

☒ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

530.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2015

Transaction ID : C3183680

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Mark Ming-Yi Yeh**

Mailing Address 330 Cordova St Unit 311

City

Pasadena

State

CA

Zip Code

91101-4604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mark M. Yeh MD Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary  
☒ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2015

Transaction ID : C3123625

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

96.14

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Christopher James Yoo**

Mailing Address 180 Manchester St

City State Zip Code  
San Francisco CA 94110-5217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California Advanced Imaging

Occupation  
Diagnostic Radiologist

Receipt For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2015

**Transaction ID : C3193709**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Rong Zeng MD**

Mailing Address 213 Gwinhurst Rd

City State Zip Code  
Knoxville TN 37934-4535

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Texas Health Science Cen

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 12 / 2015

**Transaction ID : C3122496**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Ashwini M Zenooz**

Mailing Address 576 Magdalena Ave

City State Zip Code  
Los Altos Hills CA 94024-5233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Veterans Affairs

Occupation  
Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 23 / 2015

**Transaction ID : C3178360**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 183 OF 185  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Beth Zigmund MD**

Mailing Address 412 Spruce St

City

Haddonfield

State

NJ

Zip Code

08033-1620

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Penn Medicine

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	1	5

**Transaction ID : C3181800**

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**B. Alan Miles Zuckerman**

Mailing Address 798 Birds Mill SE

City

Marietta

State

GA

Zip Code

30067-5135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quantum Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	5

**Transaction ID : C3186308**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

900.00

150145.37

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 184 OF 185

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Bank of America - Hard**

Mailing Address PO Box 27025

City  
RichmondState  
VAZip Code  
23261-7025Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2015

Transaction ID : D169311

Amount of Each Disbursement this Period

507.78
--------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

507.78
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507.78
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 185 OF 185

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Kelly PAC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Mailing Address 901 N. Washington St.  
Suite 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution to a Leadership PAC

Candidate Name

Category/  
Type

Transaction ID : D168980

Amount of Each Disbursement this Period

1500.00
---------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

1500.00
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TOTAL This Period (last page this line number only)..... ►

1500.00
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